

Ghost Town Tension
Post-War Public Health and Commerce in a Rural Virginian Polio Epidemic, 1950

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Thesis submitted to the faculty of the Virginia Polytechnic Institute and State University in partial fulfillment of the requirements for the degree of

Master of Arts

In

History

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May 1, 2012

Blacksburg, Virginia

Keywords: Polio, Poliomyelitis, Virginia, Wytheville, 1950

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Abstract

This thesis is a study of a post-World War II polio epidemic in one small Southwest Virginian town before widespread application of the vaccine. While others have explored urban public health responses to polio and national efforts to promote prevention and treatment efforts, in this history I look at reactions to the disease at the local level in this rural community particularly hard-hit by an acute medical event.

The central question addressed in the research is how the polio epidemic changed the nature of community. Prior to the polio epidemic in this rural Southwest Virginian town, community meant creating and strengthening social ties throughout town— most visibly through large social functions and leisure gatherings such as church or baseball. Through identifying and analyzing reactions to the epidemic among families/individuals, the public health, and business, a transition emerged. Being a part of community during the summer polio epidemic meant protecting the public health while simultaneously protecting economic health as a backbone and lifeline of the family.

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Introduction

Poliomyelitis History

During the summer of 1950 in the rural Appalachian town of Wytheville, Virginia, polio held families paralyzed with fear. From the beginning of June until the end of August, the rural community of Wytheville had the greatest per capita polio rate in the nation.¹ Individuals took varying stances toward resolving the polio issue. Parents forced children inside and large gatherings were cancelled to diminish the chance of infection from the epidemic raging through town. While some families promoted strict self-quarantine to save their children from the dreaded summer scourge, others fled town and risked spreading the disease throughout Southwest Virginia. Some local businessmen took seemingly unsympathetic actions to promote commerce— others closed their doors. As conflicting theories of transmission and origination poured in, local newspapers recorded mounting tallies of the town’s casualties. As families quarantined themselves behind closed doors, and visitors behind closed car windows, Wytheville *seemed* to become a ghost town.

The epidemic, or temporary prevalence of the rapidly spread polio virus, in Wytheville was one site of many for the disease in the United States. The disease reached epidemic proportions in the first half of the twentieth century and continued to incite fear in the general population until the announcement of a vaccine. After this discovery, and the subsequent

¹ Robert Anderson, ed., “The Polio Outbreak in Wythe County,” *Virginia Health Bulletin* 3, series 2 no. 12 (April 1951), 2; Jen McCaffery, “Polio Doctors Honored as Orthopedic Leaders,” *Roanoke Times* (January 21, 2006); Albert Q. Maisel, “Wytheville’s Message: Don’t Be Afraid of Polio,” *Look Magazine* 15, no. 14 (July 3, 1951), 67-74; Linda Logan, *A Summer Without Children: An Oral History of Wythe County, Virginia’s 1950 Polio Epidemic* (Wytheville, VA: Town of Wytheville Department of Museums, 2005), xi; Sarah Colt, Transcript of “The Polio Crusade,” American Experience, WGBH Boston, Public Broadcasting Service, 13; Kathryn Wheeler and Clarice Spindle, “Poliomyelitis in Wytheville and Southwest Virginia,” *The Physical Therapy Review* 31, no. 7 (1951), 272-274.

inactive-virus vaccine created by Dr. Albert Sabin (famous for its application on sugar cubes), polio was quickly eradicated in the United States and replaced in public consciousness by other epidemic viral diseases like H1N1 and HIV.

My thesis is a study of a post-World War II polio epidemic in one small Southwest Virginian town before widespread application of the vaccine. While others have explored urban public health responses to polio and national efforts to promote prevention and treatment efforts, in this history I look at reactions to the disease at the local level in this rural community particularly hard-hit by an acute medical event.

How Wythevillians responded to polio is a case study of the conflict epidemic disease posed for community cohesion in the mid- twentieth century. My question is not how the medical establishment cured polio, but how polio affected the dynamics of community life. This is certainly not a question left unexplored by historians of medicine. The present study is unique because I argue the polio experience in Wytheville shows us the interplay of family dynamics, public health demands, and the economics of small town life that shaped how Wytheville responded to the epidemic.

Scientifically speaking, we now know that vaporous water particles transmit the disease from fecal waste to oral ingestion through coughing and sneezing. The virus settles in the intestinal tract and can move to infect the nerves associated with motor control leading to paralysis of the legs, arms, or even lungs. While there is still no known cure for polio, Drs. Jonas Salk and Albert Sabin successfully created live-virus injected and orally ingested vaccines to prevent the disease. Scientists held successful trials of Salk's vaccine in northern Virginia in 1952— only two years after Wytheville's epidemic. The Centers for Disease Control reported

the last case of polio in the United States in Amish communities during 1979. This, however, is the middle of the polio narrative.

There are three phases in the history of polio: endemic, epidemic, and post-polio syndrome or post vaccine phase.² The outbreak in Wytheville concentrates on the transition from endemic to epidemic emergence of polio in a rural setting. Prior to the early 20th century, polio epidemics were virtually nonexistent. The virus lay endemic among most of the world's population for thousands of years as it almost imperceptibly passed from mother to child for generations. Polio was always present, and prior to the Twentieth Century, so was immunity because of this early exposure. Advances in hygiene via the public health movement severed lines of immunity that children acquired from growing up in a polio endemic environment.³ In other words, people growing up in increasingly cleaner environments gradually lost their immunity to polio. Ironically, the hygienic environment promoted by a growing public health movement created an atmosphere conducive to a polio epidemic in Wytheville.

Second only to the Atomic Bomb in Cold War era surveys, polio ranked second among events most feared.⁴ Unlike the indefinable fear of knowing exactly when and if the atomic annihilation was imminent, polio reliably occurred every summer in communities throughout the United States. The disease specifically targeted children in a time defined by scholars as the heyday of American childhood. Increasingly throughout the 1940s and 1950s, though still seen as a childhood disease, polio infected teenagers and adults who had not encountered the

² David M. Oshinsky, *Polio: An American Story* (New York: Oxford University Press, 2005), 9.

³ John R. Paul, *A History of Poliomyelitis*, (New Haven: Yale University Press, 1971); M.R. Smallman-Raynor and A.D. Cliff, *Poliomyelitis: Emergence to Eradication*, Oxford Geographical and Environmental Studies Series (New York: Oxford University Press, 2006), 15-17, 277.

⁴ Sarah Colt, Transcript of "The Polio Crusade," American Experience, WGBH Boston, Public Broadcasting Service.

disease as a child. Those infected with polio at older ages had a higher chance of paralysis than those who contracted the disease in early childhood. The association with childhood, however, made polio an acute horror in a time when children were particularly special. As husbands and fiancés returned from the Pacific and Atlantic theatres of World War II, birthrates exploded and baby boom era families retreated away from war and toward the home. Prior to war, those same families endured the hardship associated with the Great Depression.⁵

Just as alarming as the specific targeting of children was the potential paralysis that left dead victims and crippled survivors in the disease's wake. The disease usually invoked only a mild fever and some stiff limbs much like the common flu and those who walked away from the lesser effects of polio acquired lifelong immunity. However, the disease could have devastating consequences: paralysis or even death. Even though polio did not discriminate by age, many conceptualized it as a childhood disease. While progressively older children and adults were increasingly contracting polio, the overwhelming incidence rate in children coupled with aggressive marketing strategies by the March of Dimes kept babies and young children as the focal point for imagining the disease.

The March of Dimes, though now an organization fundraising and researching solutions for health complications in expectant mothers and babies, was once the fundraising arm of the National Foundation for Infantile Paralysis (NFIP). This organization was founded by President Franklin D. Roosevelt, himself a partially paralyzed polio survivor, and run by his longtime friend and law partner Basil O'Conner. The NFIP provided funds for nearly every recovering polio patient to defray the many transportation, hospitalization and rehabilitation expenditures.

⁵ Elaine Tyler May, *Homeward Bound: American Families in the Cold War*, (New York: Basic Books, 2008).

Paralysis was the visible marker of infection. While paralysis was the only symptom that allowed an accurate diagnosis, this symptom occurred in barely one percent of infected people. The diagnostic process required a corroborating spinal tap— a tortuous procedure requiring insertion of large needles between the lower vertebrae that would send children into hysterical crying fits. The physical trauma and psychological suffering that polio left in its wake still haunts those infected with visceral reactions of their time spent among the material artifacts developed to help suffering polio patients. Leg braces and iron lungs were lasting reminders of polio's terror.

While crutches and braces accompanied polio children on March of Dimes propaganda posters, the more terrifying artifact of summer polio outbreaks was the iron lung. The Drinker Respirator, or iron lung, was the most dreaded artifact from the polio years. Consisting of a small body length compartment, airtight, from neck to feet, it was developed by Dr. Phillip Drinker in 1929. The improved iron lung mechanically operated the respiratory system after polio paralysis made its way to the lungs. Drinker's iron lung replaced all others because of its adaptability to a wide range of heights and weights, as well as its technological innovation regulating respiration without hurting patients. At the height of polio epidemics in the 1940s and 1950s, Dr. Philip Drinker also offered blueprints for an emergency iron lung constructed from wood.⁶

⁶ Philip Drinker and Charles F. McKhann, "The Use of a New Apparatus for the Prolonged Administration of Artificial Respiration: A Fatal Case of Poliomyelitis," *JAMA* 92, no. 20 (1929), 1658-1660; John R. Paul, *A History of Poliomyelitis*, (New Haven: Yale University Press, 1971), 2-325; Philip Drinker and Edgar L. Roy, "The Construction of an Emergency Respirator for use in Treating Respiratory Failure in Infantile Paralysis," *The Journal of Pediatrics* 13, no. 1 (1938), 71-74; Joan Echtenkamp Klein and Nancy Baird, "Iron Lung," Historical Collections at the Claude Moore Health Sciences Library, University of Virginia, <http://historical.hsl.virginia.edu/ironlung/> [accessed October 10, 2011].

If respiration was affected, most victims gradually regained control of their lungs within a few years; polio interred a some in the iron lung for considerably longer. As scholar James Maxwell describes the disease in his essay on the iron lung, “The fear of polio was as much the fear of this hopeless existence as it was crippled limbs struggling with braces.”⁷ The fears of a permanent life in this iron tomb were not unfounded: the disease forced Lee Hale of Wytheville into an iron lung where he remained there until his death 32 years later— a Guinness world record.⁸ Hale’s case was unique because he contracted polio as an adult. While iron lungs were electrically powered, most had a manual pump in case of power outages. Nettie, Lee Hale’s daughter, remembers the electricity going out from time to time and having to pump the iron lung by hand. When hospitalization was necessary, the family rented a U-Haul with a generator and rushed from one electrical plug to another so her father could catch his breath between hospital floors. To read, they constructed a wire rack over his head where a mirror was already located and he would yell when finished with a page.⁹ Annie Crockett-Stark tutored a girl in an iron lung who was unable to attend school. Crockett-Stark was “petrified” to see the incapacitated girl in the iron lung, but astonished she continued to smoke while within. “It’s a long, dull existence, and [...] her attitude was ugly. She treated her mother very ugly; I do remember that, and I think it was just years of bitterness.”¹⁰

⁷ James H. Maxwell, “The Iron Lung: Halfway Technology or Necessary Step?” *The Milbank Quarterly* 64, no. 1 (1986); Drinker and McKhann, “The Use of a New Apparatus for the Prolonged Administration of Artificial Respiration,” 1658-60.

⁸ Guinness Book of World Records, email message to Wytheville Department of Museums, 2002; Mrs. David Farmer, interview by Linda Logan, March 4, 2003, transcript, Polio Oral History Collections (POHC), Wytheville Department of Museums, Wytheville, VA; Maxwell, “The Iron Lung,” 3.

⁹ Mrs. David Farmer, interview.

¹⁰ Annie B. Crockett-Stark, July 7, 2003, POHC.

Since there is no cure for polio, doctors could only manage the debilitating symptoms. For most children, manifestations included stiff and excruciatingly achy or paralyzed limbs. Doctors traditionally treated these symptoms by placing incapacitated limbs in casts or braces urging immobility until the paralysis of stiffness passed. By the summer of 1950, however, children in Wytheville might also be treated with a less traumatic form of rehabilitation developed by Sister Elizabeth Kenny. This bush nurse from the Australian Outback toured the United States between 1940 and 1950 promoting her method of actively stretching and working stiff and paralyzed legs to overcome the symptoms of polio. She sparked considerable rage and consternation among an indignant medical establishment in the United States. Allopathic medical practitioners wrote scathing letters and articles condemning her lack of formal education as she usurped a traditionally male professional sphere with resounding success. By 1950, nurses and physical therapists used Kenny's formerly unorthodox methods across the country— including the rehabilitation of patients in Wytheville.¹¹

Why was Wytheville so acutely hit by poliomyelitis? Geography and timing help to explain in Wytheville during the summer of 1950. Small population groups like Wytheville could not support endemic polio; only areas with high concentrations of humans to adequately

¹¹ John R. Paul, *A History of Poliomyelitis* (New Haven: Yale University Press, 1972); Thomas M. Daniel and Frederick C. Robbins, eds., *Polio* (Rochester: University of Rochester Press, 1997); Victor Cohn, *Sister Kenny: The Woman Who Challenged the Doctors* (Don Mills, Ontario: Burns & MacEachern Limited, 1976); "Sister Kenny: Film About Nurse Heightens Fierce Medical Controversy Over her Polio Cure," *Life Magazine* 21, no. 12 (September 16, 1946); Naomi Rogers, "Sister Kenny Goes to Washington: Polio, Populism, and Medical Politics in Postwar America," *The Politics of Healing: Histories of Alternative Medicine in Twentieth-Century North America*, Robert D. Johnston, ed. (New York: Routledge, 2004), 90-109; Stephanie True Peters, *Epidemic!: The Battle Against Polio* (Tarrytown, NY: Benchmark Books, 2005); Jacqueline Foertsch, *Bracing Accounts: The Literature and Culture of Polio in Postwar America* (Cranbury, NJ: Associated University Presses, 2008); Naomi Rogers, "'Silence has its own stories': Elizabeth Kenny, Polio and the Culture of Medicine," *Social History of Medicine* 21, no. 1 (2008), 145-161; Sister Elizabeth Kenny and Martha Ostenso, *And They Shall Walk* (New York: Dodd, Mead & Company, 1943); Elizabeth Kenny, "Kenny Treatment of Poliomyelitis," correspondence in *The British Medical Journal* 1, no. 4291 (May 15, 1943).

spread relatively benign versions of the virus. With a normal infectious disease, polio would have spared communities like Wytheville due to its isolated location in the Appalachian Mountains away from populated areas. With the town's location along multiple, high traffic travel routes, the same location that offered Wytheville economic prosperity helped polio thrive.

In a larger and intangible context, post-World War II American society's emphasis on family and economic prosperity instilled tensions that dramatically manifest as townspeople struggle with in protecting family and economic self-interest. These elements, and their underlying causes, make the Wytheville epidemic representative of many other polio outbreaks across the nation while at the same time creating a unique environment to foster the worst per capita polio rate in the country.

Historiography

Three scholars, Naomi Rogers, David Oshinsky, and Daniel Wilson, provide the basic outlines of what might be called "the polio narrative." Together, they describe the history of polio, effects of the disease, public health prevention efforts, the role of medical researchers in the successful development of a vaccine, and the personal trauma experienced by individual survivors. Naomi Rogers is the dominant scholar in polio history centered on the initial epidemics of the early 1900s. Her research argues for the gradual transition between miasmatic theories of the disease and the outcast status of polio victims, to viral transmission and the importance of Franklin D. Roosevelt on the acceptance of polio in America. David Oshinsky takes up the story where Rogers leaves off by describing FDR's formation of the National

Foundation for Infantile Paralysis (NFIP) and the March of Dimes to fight polio. He continues with a discussion of the politics behind the discovery of a vaccination for the disease and its creators, and how the NFIP had to sell the vaccine to the American people. Daniel Wilson departs from the traditional narrative by adding the personal experience of victims and their tales of suffering, coping, and living with post-polio syndrome years after their original infection.

In *Dirt and Disease: Polio Before FDR*, Naomi Rogers, Professor of History of Medicine at Yale University, analyzes the changing perceptions of polio that accompanied the disease from approximately 1900 to 1920. Rogers argues for the existence of an early link between the lower classes, filth, and polio in the medical establishment that led public health authorities down wrong scientific avenues in their search for the cure. Despite turn-of-the-century advances in the laboratory by celebrated scientists like Louis Pasteur and Robert Koch, germ theory could not overcome social stigma. “Polio epidemics,” Rogers proclaims, “highlighted the limitations of scientific solutions to social and political problems.”¹²

Wealthy middle and upper class citizens blamed lower class immigrants in city slums for harboring and transporting polio through their unhygienic habits. Though public health officials targeted what they believed to be the germ-infested segment of the population, these same people (poor, urban, immigrants) were more likely to be *immune* to polio due to the unsanitary conditions found in the poor sections of cities. Rogers argues that as more middle class children became infected, public health officials continued to assume polio was coming from

¹² Naomi Rogers, *Dirt and Disease: Polio Before FDR* (New Brunswick: Rutgers University Press, 1992), 4-6; Naomi Rogers, "Dirt, Flies and Immigrants: Explaining the Epidemiology of Poliomyelitis, 1900-1916," *Journal of the History of Medicine and Allied Sciences* 44, no. 4 (1989).

the filth of the lower classes and spent their efforts at singling out the primary culprit of transmission in insects, water, or other agents.

The disease most commonly associated with filth and the poor, however, was ironically caused by public health's insistence on a hygienic environment. Middle class families capable of maintaining a hygienic home were actually more susceptible to polio than their less prosperous neighbors.¹³ Perceptions changed in part, Rogers shows, once America's affluent president made it his personal mission to eradicate the disease. Himself a polio survivor, Franklin D. Roosevelt spearheaded the charge against this unseen foe and its threat to middle class America through his association with the NFIP.¹⁴

Whereas Rogers focuses her account primarily on urban centers, Wytheville adds a rural setting to public health efforts to address polio and at a much later date in the historical polio narrative. However, her argument that social prejudices mislead scientific efforts in the search for understanding the origination and transmission of polio holds true in Wytheville's epidemic nearly forty years later.¹⁵ While Wythevillians did not believe immigrants and blacks were the harbingers of polio by 1950, tensions and conflicts in Wytheville fell along social fault lines surrounding community.

While Rogers looks at the perceptions of polio around the turn of the century, David Oshinsky is more interested in looking at the steps leading up to the vaccine in the 1950s.

¹³ John R. Paul, *A History of Poliomyelitis*, (New Haven: Yale University Press, 1971); Neal Nathanson and John R. Martin, "The Epidemiology of Poliomyelitis: Enigmas Surrounding Its Appearance, Epidemicity, and Disappearance," *American Journal of Epidemiology* 110, no. 6 (1979), 672-692; Thurber Fales and Matthew Taback, "Observations on the Epidemiology of Poliomyelitis: From 1950 Baltimore Epidemic," *Public Health Reports (1896-1970)* 67, no. 1 (1952), 47-52.

¹⁴ Naomi Rogers, "Race and the Politics of Polio: Warm Springs, Tuskegee and the March of Dimes," *American Journal of Public Health* 97 (2007), 2-13; Naomi Rogers, "Silence has its Own Stories: Elizabeth Kenny, Polio and the Culture of Medicine," *Social History of Medicine* 21 (2008), 145-161.

¹⁵ Naomi Rogers, *Dirt and Disease: Polio Before FDR* (New Brunswick: Rutgers University Press, 1992), 4-6.

Oshinsky wrote several works on the atmosphere of the 1950s and his latest book, *Polio: An American Story*, won the Pulitzer Prize in 2006— quickly became the preeminent work on the subject. The broad sweep of his study describes the race for a cure led by the March of Dimes and the subsequent discovery of the vaccine. Oshinsky delves into the bitter rivalry between Jonas Salk, Albert Sabin, and the lesser-known Hilary Koprowski in the race to find a cure, and questions how this rivalry might have led to a mixed reception of the vaccine among the public. He also analyzes the impact the NFIP had on galvanizing interest in a disease that threatened American community after World War II comparable to the looming threats of communism and the atomic bomb. He argues that the efforts of the NFIP through the March of Dimes inaugurated a new age of philanthropic fundraising while simultaneously energizing the national government and general population’s support and organization for medical research.¹⁶ As enlightening as this story of the politics and maneuvering of medical progress assisted by voluntary organization is, Oshinsky’s study does little to explore the personal experience of polio among ordinary people.

Daniel Wilson, polio survivor and Professor of History at Muhlenberg College, writes, in contrast, about the deeply personal influence of polio on patients in *Living with Polio*; perhaps the most popular of many survivor works, illustrating the impact of polio on the individual.¹⁷

¹⁶ Oshinsky, *Polio: An American Story* (New York: Oxford University Press, 2005); Jane S. Smith, *Patenting the Sun: Polio and the Salk Vaccine* (New York: William Morrow & Company, 1991); Jeffrey Kluger, *Splendid Solution: Jonas Salk and the Conquest of Polio* (New York: G.P. Putnam & Sons, 2004); Paul Offit, *The Cutter Incident: How America’s First Polio Vaccine Led to the Growing Vaccine Crisis* (New Haven: Yale University Press, 2005); Bernard Seytre and Mary Shaffer, *The Death of a Disease: A History of the Eradication of Poliomyelitis* (New Brunswick: Rutgers University Press, 2005).

¹⁷ Daniel J. Wilson, *Living With Polio: The Epidemic and Its Survivors* (Chicago: University of Chicago Press, 2005);

Wilson's book is not the only survivor tale.¹⁸ It is, however, the most pertinent through Wilson's experience as a polio survivor and training as a historian. In addition to the obvious physical impact of polio, he adds accounts of patient treatment in hospitals, hardships at home, post-polio syndrome, and previously untold psychological trauma on survivors to the historiography. Departing from a strict retelling of the polio story and rise of the vaccine, Wilson utilizes interviews to paint a sad portrait of survivors left crippled and deformed in the wake of a terrifying disease. Looking at polio through their experiences, Wilson argues that these crippled bodies conflicted with the desired normality of post-war American culture. He goes on to illustrate how polio survivors who dared challenge the prejudice experienced at every turn were at the forefront in fighting for civil rights for the disabled.¹⁹

While Wilson does show the physical and psychological impact of polio on individuals, he is not interested in how the disease affected the larger community. In the historiography of

¹⁸ Oral History Compilations: Linda Logan, *A Summer Without Children: An Oral History of Wythe County, Virginia's 1950 Polio Epidemic* (Wytheville, VA: Town of Wytheville Department of Museums, 2005); Daniel J. Wilson, *Living With Polio: The Epidemic and Its Survivors* (Chicago: University of Chicago Press, 2007); Edmund J. Sass, *Polio's Legacy: An Oral History* (Lanham: University Press of America, 1996); Tony Gould, *A Summer Plague: Polio and Its Survivors* (New Haven: Yale University Press, 1997); Fred Davis, *Passage Through Crisis: Polio Victims and Their Families* (New Brunswick: Transaction Publishers, 1991); Edmund J. Sass, George Gottfried, Anthony Sorem, *Polio's Legacy: An Oral History* (Lanham: University Press of America, 1996); Janice Nichols, *Twin Voices: A Memoir of Polio, the Forgotten Killer* (New York: iUniverse Press, 2008).

Survivor Autobiographies: Kathryn Black, *In the Shadow of Polio: A Personal and Social History* (Cambridge: Perseus Publishing, 1996); Anne Finger, *Elegy for a Disease: A Personal and Cultural History of Polio* (New York: St. Martin's Press, 2006); Shelley Fraser Mickle, *The Polio Hole: The Story of the Illness that Changed America* (Gainesville, FL: Wild Onion Press, 2009); Charles L. Mee, *A Nearly Normal Life: A Memoir* (Boston: Little, Brown, and Company, 2000); Susan Richards Shreve, *Warm Springs: Traces of a Childhood at FDR's Polio Haven* (Boston: Houghton Mifflin, 2007); Gary Presley, *Seven Wheelchairs: A Life Beyond Polio* (Iowa City: University of Iowa Press, 2008); Allen Rucker, *The Best Seat in the House: How I Woke Up One Tuesday and Was Paralyzed for Life* (New York: HarperCollins, 2007); Peg Kehret, *Small Steps: The Year I Got Polio* (Morton Grove, IL: Albert Whitman & Company, 1996).

¹⁹ Daniel J. Wilson, "Psychological Trauma and Its Treatment in the Polio Epidemics," *Bulletin of the History of Medicine* 82 (2008), 848-877; Daniel J. Wilson, "Braces, Wheelchairs, and Iron Lungs: The Paralyzed Body and the Machinery of Rehabilitation in the Polio Epidemics," *The Journal of Medical Humanities* 26 (2005), 173-190; Daniel J. Wilson, "A Crippling Fear: Experiencing Polio in the Era of FDR," *Bulletin of the History of Medicine* 72 (1998), 464-495.

polio, there is little authoritative work concerning how local communities responded when polio invaded. Where such works do exist, the accounts are of urban environments. Two notable exceptions are by Heather Wooten and Linda Logan. Wooten looks toward Texas, specifically the Houston area (which held the second highest rate of infection), to describe the impact of the disease and the relationship among reactions to polio between the state and national level. Wooten analyzes the dynamics between the Roosevelt presidency, Texas politics, and polio survivors on rehabilitation efforts and the establishment of medical facilities.²⁰ Linda Logan first told the story of Wytheville through a compilation of oral histories from residents of Wytheville during the epidemic. Her accounting of the general narrative provides the first comprehensive study of events my work builds on the foundation she laid.²¹

My research expands the traditional narrative by adding the Wytheville epidemic experience to the historiography and doing so through a local perspective. I address the missing pieces of the established polio story by looking at the summer polio epidemic in one small Virginian town. The experiences of townspeople illustrate how a unique set of ideals came together in the early 1950s to shape the responses to a dreaded disease. In doing so, several histories/biographies of diseases and their impact on community shaped my thoughts.²²

²⁰ Heather Green Wooten, *The Polio Years in Texas: Battling a Terrifying Unknown* (College Station: Texas A&M University Press, 2009).

²¹ Linda Logan, *A Summer Without Children: An Oral History of Wythe County, Virginia's 50 Polio Epidemic* (Wytheville, VA: Town of Wytheville Department of Museums, 2005); Alice Sink, *The Grit Behind the Miracle* (Lanham: University Press of America, 1998).

²² Eric Jarvis, "A Plague in Paradise: Public Health and Public Relations During the 1962 Encephalitis Epidemic in St. Petersburg, Florida," *Florida Historical Quarterly* 85 (Spring 2007): 371-97; Alice R. Wexler, "Chorea and Community In A Nineteenth-Century Town," *Bulletin of the History of Medicine* 76 (2002): 495-527; Sheldon Watts, "Yellow Fever, Malaria, and Development," *Epidemics and History: Disease, Power, and Imperialism* (New Haven: Yale University Press, 1997), 213-56; J.N. Hayes, "Cholera and Sanitation" and "Tuberculosis and Poverty," *The Burdens of Disease: Epidemics and Human Response In Western History* (New Brunswick: Rutgers University Press, 1998), 135-179; Roger Cooter and John Pickstone, eds., *Medicine in the Twentieth Century* (Amsterdam: Harwood Academic Publishers, 2000): 575-589; Charles E. Rosenberg, *The Cholera Years: The United States in*

These works contextualize Wytheville and its polio survivors into a distinct time and place.

Whereas Logan takes for granted the underlying social tensions at working during the epidemic, this work brings these post-war tensions to the forefront.

I suggest that responses to epidemic show how individual and communal wisdom tempered the scientific authorities of the era. By looking at polio in Wytheville, I add a new dimension to the polio narrative. My research suggests that the polio epidemic experience exposed the competing tensions among public health demands, family dynamics, and the economics of small town life. Together, these forces shaped how community suffered during the epidemic, but they also suggest why life revived so quickly afterward.

Methodology

Methodologically, this work is a micro history.²³ I argue that by looking at a local event, such as the responses to an epidemic, we can uncover the values that shaped the meanings of community in mid-twentieth century Virginia. Where primary sources would otherwise be scarce for a study of disease in a rural setting, Wytheville's epidemic remains in the local memory and archival sources. Primary sources utilized in my research are itemized in the bibliography and include personal correspondence, local newspaper coverage of the epidemic,

1832, 1849, and 1866 (Chicago: University of Chicago Press, 1987); Margaret Humphreys, *Yellow Fever and the South* (Baltimore: Johns Hopkins University Press, 1999); Nancy Tomes, *The Gospel of Germs: Men, Women, and the Microbe in American Life* (Cambridge: Harvard University Press, 1999); John M. Barry, *The Great Influenza: The Story of the Deadliest Pandemic in History* (New York: Penguin Books, 2005); Judith Walzer Leavitt, *Typhoid Mary: Captive to the Public's Health* (Boston: Beacon Press, 1997); John Ward and Christian Warren, eds., *Silent Victories: The History and Practice of Public Health in Twentieth Century America* (New York: Oxford University Press, 2007); Susan Sontag, *Illness As Metaphor* (New York: Farrar, Straus, & Giroux, 1978).

²³ From the methods of Clifford Geertz involving thick description in developing conclusions regarding the micro that may be true for the majority of the macro. Clifford Geertz, "Thick Description: Toward an Interpretive Theory of Culture," *Interpretations of Cultures* (New York: Basic Books, 1973), 3-31.

local advertisements and directories, nationally circulated periodicals, government documents, and oral histories from polio survivors and other citizens of Wytheville. Mayor William “Bill” Arthur’s personal correspondence from the summer of 1950 serves as a compendium for local/popular knowledge of polio. These letters help illustrate not only the wide knowledge of Wytheville’s epidemic, but how ordinary people conceived of the disease. *The Wythe County News* and *The Southwest Virginia Enterprise*, the two local newspapers, reported a “play-by-play” of the disease’s latest victims and actions taken to stem the tide of polio. Other urban papers also mention the town’s plight, including *The Roanoke Times*, *The Richmond Times-Dispatch*, *The Chicago Tribune*, and *The Washington Post*. Looking at nationally circulated and popular magazines such as *Life*, *Look*, and *Time* allows me first to assess the culture of scientific progress portrayed by such magazines and the state of mainstream scientific knowledge at the time. Finally, in 2007, the Wytheville Department of Museums opened a professionally designed exhibit of the town’s polio past. The Department built this exhibit in conjunction with a compilation of oral history interviews amassed by the museum’s staff and edited by faculty at Radford University. Copies of these transcribed oral history interviews are utilized in my research.²⁴

In writing a micro historical work, I am deviating from the traditional narrative describing polio in relation to the race for a cure — as in Oshinsky’s work. Instead, I

²⁴ From what I can decipher in the transcribed oral history interviews, there are approximately ten general questions asked to all participants: What was Wytheville like in 1950? What do you remember about the theories and causes of polio? Do you recall any life style changes that you or your family made that year due to the polio epidemic? What was your main source of information about polio during the epidemic? Did you know anyone who required crutches, braces, or were in iron lungs? Do you remember what role the March of Dimes played in the community? What was your reaction, or the general reaction to the polio vaccine in 1952? Have you or someone you know had any complications with post-polio syndrome? In your experience during the polio epidemic, is there anything you learned that could benefit future generations? Does anything about the recent anthrax scare remind you of the polio epidemic?

contextualize an epidemic and focus on impact of such large cultural forces as consumerism, scientific discovery, and public health on a specific community. The epidemic situation in Wytheville, though particularly dramatic, was typical among many communities throughout the nation and may serve as a microcosm from which to explore these influential forces. I am loath to over-determine the relationship between economic, family, and public health interests and the polio epidemic. There were many other factors involved, and much of community life resumed once the epidemic passed. Regarding the social historical perspective this research takes, another weakness might result from homogenizing the epidemic experience. Care must be taken to diversify the impact of polio and reactions to the disease.²⁵ Trying to understand the role public health and consumerism had on this rural epidemic requires understanding the individual people, groups, and institutions that were a part of this history as well as the sex and race boundaries during the 1950s.

Structure

The story of Wytheville's polio epidemic is divided into three chapters. Chapter 1 looks at family life and the individual experiences with polio. I focus less on the way the illness affected the body and more on how the illness focused family and community efforts on protecting the children. These efforts demonstrate the importance of children in the postwar baby boom years. Structurally, I will look comparatively at community life before, during, and after the epidemic of 1950 to illustrate the relative normalcy and everyday interaction in the

²⁵ George Iggers, *Historiography of the 20th Century: From Scientific Objectivity to the Postmodern Challenge* (Hanover, N.H.: Wesleyan University Press, 1997), 101-18; Giovanni Levi, "On Microhistory," *New Perspectives on Historical Writing* (University Park: Pennsylvania State University Press, 2001), 97-120; Carol Kammen, *On Doing Local History* (Walnut Creek, CA: Altamira Press, 2003).

summer prior to the epidemic and a return to life after that ill-fated summer. While setting the stage and providing a general outline of events, this chapter shows the environment polio affected and the reaction to disease by individual families. For example, what did townspeople do on a daily basis the summers before and after polio and how might this be emblematic of rural community? How did families react to the unwanted summer visitor and how did these reactions upset community? How might the disease have affected different community demographics differently (*i.e.* women, children, blacks)?

In Chapter 2, I examine the medical responses to polio in Wytheville. The local and state government took decidedly mixed actions to alleviate the town's plight. Differing attitudes and beliefs about polio among different levels of government informed public health measures. I argue there was a discrepancy between scientific knowledge at the national/state level and the local understanding and implementation of that knowledge.

At best, actions taken by the town did little to help— sometimes those actions unintentionally hurt. State health officials refused to quarantine the town, believing it would impair efforts at mitigating the effects of the disease. Failure to act forced townspeople to fend for themselves as individuals responded to polio based on their constructed understanding of the disease. Such responses appeared as use of folk remedies, establishment of quarantines, and application of pesticides.

In Chapter 3, I focus on the commercial response to the polio epidemic. Tensions between scientific and folk beliefs in Wytheville's public health response to the epidemic were only part of the story. In addition to the unique 1950s era family values and mixed public health reactions, a third powerful force that shaped Wythevillians response to the outbreak

was the economic ethos of the era that valued business enterprise and consumerism. Did the tension between public health and consumerism during this epidemic wipe Wytheville, Virginia from the map or help support a community crippled by an unseen foe? The central tension of protecting both health and wealth accounts for contradictory reactions to the epidemic during 1950 and perhaps the quick return to life after that notorious summer.

When taken together, all three chapters illustrate the importance of community to Wythevillians in mid-century. Did community in Wytheville return in the same fashion as it was prior to polio? Did the disease, if only temporarily, change the definition of community? For those townspeople spared, community meant families protecting children, it meant a government and a medical community that responded to threats on individual and familial wellbeing, and it meant that a solid economic structure provided a foundation for both family and community to thrive in the 1950s. The study of how Wytheville responded to polio shows us how an epidemic can complicate implementation of these values. Though most aspects of life that characterize community returned to their pre-epidemic status, polio also had lasting consequences for community as well as for individual Wythevillians.

Chapter One

Ghost Town Life: Community and Family Reactions During the Summer Without Children

1949: Prelude to an Epidemic?

During the summer of 1949, Wytheville functioned as a community; life in the town was marked by a high degree of social interaction between townspeople. Comprising this expression of community, Wythevillians shared with other Americans a spirit of individualism and commitment to putting family first. Looking at Wytheville prior to the polio summer helps lay the foundation for future understanding regarding the tensions in townspeople's reactions to the epidemic. LeRoy Ashby accurately describes the atmosphere of conflicting ideologies that permeated the town:

The values that Americans most prized cut in several directions. The myth of the rugged individual collided with that of the close-knit community of helpful neighbors. Celebrations of change and progress competed with nostalgia for the "good old days." Relaxation and fun jeopardized traditional values regarding work and self-discipline. The growing stream of consumer products after World War II contrasted favorably with the perceived starkness of Communist societies, yet some critics worried that goods in fact jeopardized American goodness.¹

¹ LeRoy Ashby, *With Amusement for All: A History of American Popular Culture since 1830* (Lexington: University Press of Kentucky, 2006), 303.

These characteristic tensions between change and tradition, the individual and community, and leisure and work were exacerbated in Wytheville by the appearance of a polio epidemic. The prior quote does not, however, highlight the value placed on children in the post war years, despite their pivotal role in these tensions. Childhood historian Steven Mintz argues that moral panics over children throughout the nation's history could also stand for other more nebulous issues.² Children were a symbol of both family and community— when polio targeted the young, the disease threatened more than individual children. It threatened the town's social values.

Community theorist Robert Putnam argues that despite segregation, the non-equal status of women, high infant mortality, and environmental mismanagement, civic engagement and social interaction in the 1950s and early 1960s reached an all-time high in American domestic history. This extraordinary degree of social interactions, or benevolent connections between people in a community, was the foundation for the success of eradicating polio.³ The NFIP relied on civic organizations for financial support to defray nearly all expenses for polio patients in Wytheville and the greater United States. Part of the March of Dimes' unprecedented success came from its unique organizational strategy of asking only for small sums of money from ordinary lower and middle class American families.

Polio, because it was perceived as a disease of childhood, disrupted community activities as individual families took steps to protect what they valued— their children. The urge to protect children trumped all else. The child demographic made polio an acute horror in

² Steven Mintz, *Huck's Raft: A History of American Childhood* (Cambridge: Harvard University Press, 2004), ix.

³ Robert D. Putnam, *Bowling Alone: The Collapse and Revival of American Community* (New York: Simon & Schuster, 2001).

a time when children were particularly special during the baby boom era as families turned away from World War II and toward the home. While some families promoted strict self-quarantine to save their children from the dreaded summer scourge, others fled town and risked spreading the disease throughout Southwest Virginia. Some parents took their clothes off before entering the house and scrubbed vigorously with soap, others refused to buy anything they did not grow themselves.⁴

This chapter underscores the contest between individual/family and community by examining how individuals and families reacted to a polio epidemic and how their reactions highlight the value members of the community placed on the protection of children. To understand the responses in 1950, we need to know what was important to Wythevillians and how they saw their community before the epidemic— a snapshot of the town in 1949.

When referring to community in Wytheville, I am writing about an all-encompassing atmosphere of relationships. This rural Southwest Virginian town and the people who inhabit it have a distinct geographic and cultural community and also share a common identity. Thomas Bender defines community as “a social network characterized by a distinctive kind of human interaction.”⁵ Events and relationships at the national and the local level shaped community in Wytheville. Acknowledging that communities are “imagined” as in Benedict Anderson’s conceptualization, descriptions are informed by the lived experience. While even more so in the 1950s, still today rural communities are described in interviews and polls with words such as “haven, refuge, safe,” and “simple.” Additionally, this imagined environment is shaped, in

⁴ Mr. and Mrs. Jimmie Kincer, interview by Linda Logan, November 21, 2002, transcript, Polio Oral History Collection (POHC), Wytheville Department of Museums, Wytheville, VA.

⁵ Thomas Bender, *Community and Social Change in America*, (New Brunswick: Rutgers University Press, 1978), 11, 43.

part, by what social commentator and scholar David Hummon calls the “general anti-urbanism of American culture.”⁶ Polio attacked a geographic community, obviously, but it also attacked the nature of 1950s community culture. Being a part of a post-war American community meant identifying with the national community through spending and consumption, while at the same time identifying with the local community through communal leisure activities, municipal organizations, and supporting a family.⁷ The result of Wytheville’s polio outbreak in the summer of 1950 was a temporary tear in the fabric of this local community’s identifiers and the severing of social ties between citizens.

Originally named Evansham by travelers migrating down the Great Wagon Road from Philadelphia, the town was incorporated and renamed Wytheville around 1800 by a group of prominent town figures collectively known in the record books as “The Powers of Wytheville.” These local political and business leaders charged themselves with recruiting other people and businesses to the town on redistributed plots of land throughout the town limits. The small town of Wytheville became the seat of Wythe County and the political, economic, and cultural hub of Southwest Virginia between Roanoke in the east and Bristol to the west.⁸ Fire destroyed many of Wytheville’s wooden homes and businesses in 1924. During the revival, Main Street was widened and lined with picturesque brick sidewalks and a row of trees on either side. Pavement and parking spaces replaced dirt and mud roads with wooden posts to holster

⁶ Benedict Anderson, *Imagined Communities: Reflections on the Origin and Spread of Nationalism* (London: Verso, 1991); David M. Hummon, *Commonplaces: Community, Ideology and Identity in American Culture*, (Albany: State University of New York Press, 1990).

⁷ Lizabeth Cohen, *Consumer’s Republic: The Politics of Mass Consumption in Postwar America: The Politics of Mass Consumption in Postwar America*, (New York: Knopf, 2003); May, *Homeward Bound*.

⁸ William Arthur, “Wytheville’s One Hundred and Fifty Years,” *Wythe County Historical Review* 36 (1989), 1-3; Annie B. Crockett-Stark, interview by Linda Logan, July 7, 2003, transcript, Polio Oral History Collection (POHC), Wytheville Department of Museums, Wytheville, VA.

horses. At the heart of Wytheville in 1949 were two-tiered buildings with restaurants and shops at the bottom and offices and apartments above.

Census data collected in 1950 reports 5,513 inhabitants— 909 were children under age nine. Half of Virginia’s population lived in rural areas at the time; Wytheville, in contrast, was beginning a slow advance in population to the ranks of the state’s metropolitan areas of Arlington, Norfolk, Richmond, and Roanoke. Most of the population was white; African Americans in Wytheville numbered 500 during 1950.⁹ In Wytheville, as in most southern communities prior to the civil rights movement, segregation was a way of life. Wytheville Training School provided for the education of African-Americans until 1952. The building was the focal point for the black community during the first half of the century.¹⁰ In addition to starting programs in the white parks, the town’s outdoor recreation department debuted two parks for African-Americans the summer before polio.

Commercial establishments provided summer leisure-time activities for both tourists and locals. People attended the summer stock theatre for opera or performances. Others frequented the Millwald Theatre on Main Street or Sunset Drive-In on the outskirts of town for only one dollar per car. Many townspeople congregated in civic clubs, bowling alleys, and gatherings sponsored by one of the many town churches. Wythevillians might grab a bite to eat at Archer’s Diner, Derby Grill, or enjoy a regionally famous ham biscuit from Durham’s Restaurant.¹¹ Children and teens might stop at the Central Drugstore’s soda fountain. Many

⁹ U.S. Department of Commerce, “Characteristics of the Population,” *Census of Population: 1950*, vol. 2, part 46 (Washington D.C.: U.S. Government Printing Office, 1953), 46.152.

¹⁰ “Wytheville Training School Cultural Center,” www.wythevilletrainingschool.org/ [accessed January 16, 2012].

¹¹ Inter-Mountain Telephone Company Directory, 1945 and 1954.

country kids hopped a passing train to Wytheville to shop or watch local farmers sell cattle at the stock market. Town kids spent their days swimming at McWane Pool which started its annual season in early June.

When in their homes, Wythevillians could listen to local radio programs. Radio came to Wytheville in 1949, when Arthur Gates, a physician, and Robert Epperson, a radio engineer, financed the first station.¹² Programming for the radio station ran period music, religious programs, narrated stories, and national headlines all supported by advertisements from businesses.

The connections to a world outside Wytheville were, perhaps, best symbolized by the presence of the army's recruiting station. Though World War II officially ended in 1945, tensions between the United States and Soviet Union were running high. As the conflict in the Korean Peninsula becoming a pressing international issue, the recruiting station maintained regular hours in Wytheville from 8:00-4:00.¹³

Thus was life in Wytheville the summer before the epidemic. But it is important to note that when polio appeared in 1950, it was not a new or unknown disease. Like other towns throughout the nation from 1900 to 1950, polio left some of children with crutches or braces after every summer. While many communities of the same time and location knew polio as a very real threat, for the entire Commonwealth of Virginia, the Public Health Office recorded only 16 confirmed cases in of poliomyelitis in 1949— down 11 cases from 1948.¹⁴ While some

¹² Wythe County Historical Society, "Untitled," *Wythe County Historical Review* 34 (1988), 20; Logan, *A Summer Without Children*, 46-7.

¹³ "Navy Recruiting Station to be Open," *Southwest Virginia Enterprise*, June 7, 1949.

¹⁴ J. Robert Anderson, ed., *Virginia Health Bulletin* 1-4, series 2 (Richmond: Virginia State Department of Health, May 1948-April 1952).

families in Wytheville may have known someone who had contracted polio, the majority probably knew more about the disease through March of Dimes advertisements on the radio or in newspapers than firsthand accounts.

1950: The Summer Without Children

When a few cases appeared in early summer 1950, there was no immediate cause for alarm. What started off as a few cases of infantile paralysis during the summer of 1950 swelled to over 100. Because polio hit during the summer and primarily targeted children, Wythevillians labeled that time the “Summer Without Children.”¹⁵ Looking at this notorious summer illustrates how polio pushed communal spirit inward and refocused family determination to protect the children. Many families’ efforts were futile. In the beginning of July the Public Health office reported only 5 cases. By middle of the month, that total swelled to 15 cases. By August 1, cases exponentially increased to 100 cases, and by mid-August there were 148 confirmed cases, 16 deaths, and 104 polio patients returning home from quarantine wards of the hospitals to begin rehabilitation at home. When the epidemic subsided in the fall, the total number of confirmed polio cases in Wytheville numbered 184 with 17 fatalities.¹⁶

Polio in Wytheville was almost immediately associated with family leisure activities. Baseball in Wytheville is forever associated with poliomyelitis. The epidemic seemed to start with America’s pastime because the local ballpark, Withers Field, was ground zero for the epidemic. For summer entertainment, crowds flocked to the local baseball field on Friday nights to enjoy a game played by the popular Wytheville Statesmen, members of a class D,

¹⁵ Sally Wolfenden, “A Summer Without Children,” *Southwest Virginia Enterprise*, August 22, 1950.

¹⁶ Anderson, *Virginia Health Bulletin*.

semi-professional league. America's pastime was emblematic of community activity, especially among rural populations. On those warm summer weekends, the crowd could swell to 1,000 people— approximately one fifth of the town's population. The Statesmen were ranked number one in the Blue Ridge League, just ahead of Mt. Airy, North Carolina.

Two-year-old Johnny Seccafico went with his parents to the Millwald Theatre on Main Street to see *The Purple Heart* the night before one of his father's big games. Jim Seccafico, Johnny's father and the Statesmen's second baseman, was conspicuously absent from Withers Field the following night in a big game against the Wilkesboro Flashers. The Statesmen won the game 13-10, however, during the seventh inning stretch announcers asked spectators to take up a collection for the second baseman's son because, as the announcement rang out, the Seccafico's were on their way to Memorial and Crippled Children's Hospital in Roanoke. Johnny had polio.¹⁷ Doctors diagnosed David Blair, a young child from Wytheville and second polio case in town, while the game was winding down. The manager for the Statesmen recalls this as the start of the epidemic and noted following this ill-fated day, "four of us were in the little 2 ft. by 4 ft. press box at Withers Field, and two of the four got polio."¹⁸

By July 7, Virginia's Public Health Office reported five positive cases coming from Wytheville— the only cases coming out of Southwest Virginia at the time. While five cases in the course of a summer was no strong cause for alarm, C.F. Pope, state public health official for the county, advised the community on precautions to protect against polio: wash hands frequently; avoid excessive strain with children resting often; avoid water; keep flies away; do

¹⁷ Rebecca Huddle, September 20, 2002, POHC; Statesmen Defeat Flashers 13 To 10 For Fourth Straight Win," *Wythe County News*, June 8, 1950; "Two Positive Cases, And Two Suspects Of Polio in County," *Southwest Virginia Enterprise*, June 4, 1950; Maisel, "Wytheville's Message: Don't Be Afraid of Polio," *Look Magazine*, 67-74.

¹⁸ Logan, *A Summer Without Children*, 13; Ed Zuber, March 17, 2003, POHC.

not travel; postpone nose, throat, and dental operations till winter; avoid crowds; and call the family physician for such symptoms as headaches, gastrointestinal upsets, or fever. “It is urgent that parents keep their children away from public amusement places and off the streets,” Pope went on to caution, “the best place for children to play is [...] by themselves.”¹⁹

Families with children were the core of community in 1950, and how townspeople viewed themselves in this time is important for understanding Wythevillians’ reactions to the outbreak. Like communism and the atomic bomb, American families feared polio for its attack on seemingly safe institutions: the church, school, ballpark, sidewalk, and even one’s own backyard.²⁰ Family was a critical part of that sense of community, and during this summer, parents increasingly turned toward the home as their center for community as polio severed ties *between* families. The town-wide focus of community buckled under the growing threat of polio and was partially replaced by individual leisure activities and a family-centered focus more accommodating to the inhospitable environment temporarily created by polio as parents strove to protect their children. Those same Cold War era surveys document the American story of mass consumption— a consumption which became increasingly identified as patriotic and a part of being “American.”²¹ Individualized leisure became “important rituals of national identity in daily life” when important communal rituals were stopped by the polio outbreak.²²

¹⁹ “County Health Officer Gives Suggestions for Protection Against Infantile Paralysis,” *Southwest Virginia Enterprise*, July 7, 1950; “Health Official Issues Statement Relative to Polio,” *Southwest Virginia Enterprise*, July 11, 1950.

²⁰ Jacqueline Foertsch, “‘A Battle of Silence’: Magazines and the Polio Crisis In Post-War UK and USA,” in *American Cold War Culture*, Douglas Field, ed., (Edinburgh: Edinburgh University Press, 2005), 17-31.

²¹ Sarah E. Igo, *The Averaged American: Surveys, Citizens and the Making of a Mass Public*, (Cambridge: Harvard University Press, 2008), 6.

²² Charles F. McGovern, *Sold American: Consumption and Citizenship, 1890-1945*, (Chapel Hill: University of North Carolina Press, 2006).

The Cold War, consumerism, leisure, and religion all contributed to how people conceived of themselves.

While people knew polio affected all ages, public fear focused on how polio would affect the children. Children are not only an evocative lens through which to view the town's outbreak, they were the backbone of community. Most look back on the 1950s as the "golden age of childhood" and the standard by which childhood was measured in subsequent decades. The early to mid-twentieth century marks another turning point in the popular perception of children. In the nineteenth century, children were useful workers in securing economic stability. In the twentieth, however, childhood was to be preserved.²³

"Far from relying on his child as old-age 'insurance,' the middle-class father began insuring his own life and setting up other financial arrangements... to protect the unproductive child," declared one commentator in *Harper's Weekly*. This transition from utility to sentimentality created a "useless but priceless" child.²⁴ Letters to the *Southwest Virginia Enterprise* indicate many felt putting a price on children's lives through insurance was ethically reprehensible and controversial because it defiled the "cult of the child." Despite the controversial nature of making money off a kid's life, life insurance for children was a lucrative success for insurance companies.

As an agricultural and tourist hub, 1950s Wytheville community consisted of relatively wealthy middle class families and agricultural working class families. Children were important to these families for different reasons. Middle class children were prized in this golden era of

²³ Mintz, *Huck's Raft*, 275-83; Viviana A. Rotman Zelizer, *Pricing the Priceless Child: The Changing Social Values of Children* (Princeton: Princeton University Press, 1985), 113-137.

²⁴ Zelizer, *Pricing the Priceless Child*, 5, 113-137.

childhood while children of agricultural families were needed to help out on the farm. Soon after the start of Wytheville's epidemic, several insurance advertisements popped up in Wytheville urging parents to enroll. Headlining "Protect Your Family Against Polio," children's polio insurance paid benefits up to \$5,000 for doctor and nurse bills, ambulance and hospital services, medicine, as well as iron lungs, braces and crutches.²⁵

Steven Mintz argues there is a paradox in American childhood. While children were separated in their own sacred sphere away from the harsh realities of their parents in an attempt to maintain innocence, at the same time, they were further indoctrinated into their parents' world of consumer society. Howard Chudacoff elaborates the 1950s marked a turning point in child leisure where consumer institutions like stores and toy manufacturers inserted themselves between parents and their children. Unstructured outdoor play and a peer-oriented culture characterized children's leisure in the first half of the twentieth century. Such aspects of youth leisure created an atmosphere of autonomous freedom of action. Beginning in 1950 and through the rest of the century, parents transitioned from toy advisors to financiers as technology (primarily television, but starting as early as radio and print advertisements) buffered the family and allowed children more authority in American consumer society. More money was spent on children than ever before, from \$84 million in 1940 to \$1.2 billion by 1960. In turn, these toys continued to enforce 1950s conservative gendered roles.²⁶

The national atmosphere surrounding children and family in which I engage was a product of experiences and memories the Great Depression, World War II, and the looming

²⁵ "Protect Your Family From Polio," *Southwest Virginia Times*, Wytheville, VA: July 14, 1950; Zelizer, *Pricing the Priceless Child*, 5, 113-137.

²⁶ Mintz, *Huck's Raft*, 275-83; Chudacoff, *Children At Play*, 126-158.

communist threat. Birthrates doubled while society pitied childless couples as parents attempted to return to the safety and comfort of the home. More young women were marrying and at younger ages than in previous decades. Though families had been shrinking in size each year since the beginning of the nineteenth century, they doubled from the 1940s to the 1950s with this renewed interest in the family.

Though women made significant contributions to the war effort, returning young soldiers displaced these new working women. The renewed emphasis on father's place as breadwinner left women's contributions to society in the home. Mothers transitioned out of the workplace and into the role of leisure coordinator in the child centered neighborhood.²⁷ As Cold War society supported the primacy of domestic family life, period magazines illustrated society's demands on women to maintain a hygienic home. An analysis of women's magazines shows many polio stories, though sent in, were never published. Those few works chosen by editors were selected because they were written comfortingly to spare women from the distress. In forcing families away from the community and into the home, however, polio required vigilance on the part of the mother. Because of the patriotic domestic mandate, inventive women accounted for the majority of March of Dimes fundraisers and spearheaded door-to-door solicitations and high earning fashion shows.²⁸

Families and individuals drew inward in response to polio. Experiences during Wytheville's epidemic complicate perceptions of family life in this "golden era of childhood."

²⁷ Elaine Tyler May, *Homeward Bound: American Families in the Cold War*, (New York: Basic Books, 2008); Steven Mintz, *Huck's Raft: A History of American Childhood*, (Cambridge: Harvard University Press, 2004), 275-83; Steven Mintz and Susan Kellogg, *Domestic Revolutions: A Social History of American Family Life*, (New York: Simon & Schuster, 1988), 178-189.

²⁸ Jacqueline Foertsch, "'A Battle of Silence': Magazines and the Polio Crisis In Post-War UK and USA," in *American Cold War Culture*, Douglas Field, ed., (Edinburgh: Edinburgh University Press, 2005), 17-31.

While public health authorities felt playing in the backyard alone would suffice to prevent transmission, many families would not allow their children out. While the NFIP offered only general guidelines on what the town should avoid, state, local, and finally parental authorities were increasingly stringent in their aims at avoiding the disease to protect the child-centered society of the 1950s. Individuals and families, feeling neglected with seemingly ineffectual precautions, practiced self-imposed home quarantine and strict disinfectant procedures.

Resident D.L. Barnett remembers seeing some children playing with water from an old iron water fountain. Police officers hurriedly ushered the kids into a nearby building until their parents picked them up. Families bought sterno cans and formaldehyde candles hoping to disinfect the air. Others bought asetifida bags to ward away the disease. Townspeople wore these little foul-smelling bags of herbs around the neck, though it did more to reassure than medically help. Bankers sprayed fly spray on bills to kill any possible insect transmitted virus.²⁹ Families developed disinfectant routines to continue working while protecting children from polio. One husband and father who worked at the local knitting mill during the summer came home around midnight for his daily routine which included taking all clothes off outside and an intensive bath and scrubbing inside.³⁰ When forced to go out for necessities, families covered their mouths with handkerchiefs and bandanas everywhere they went.³¹

Since parents forbade their children to roam the streets in the carefree atmosphere they were accustomed, families inventively adapted their entertainment. Families found myriad creative ways to sustain their previous levels of leisure and consumption individually,

²⁹ D.L. Barnett, August 6, 2002, POHC.

³⁰ Carter Beamer, August 8, 2002, POHC; Beverly Repass Hoch, March 17, 2003, POHC.

³¹ Annie B. Crockett-Stark, July 7, 2003, POHC.

despite the quarantined atmosphere families secluded themselves. Instruments of leisure held different meanings for children and their parents and were a means of solidifying the affection parents sought in their quest for comfort. One wealthy parent “put a pile of sand in his living room for his children to play in.”³² True to Appalachian tradition, mothers taught their daughters quilting to pass time and commemorate missed loved ones. Mothers and daughters stitched quilts with the names of other children their daughters missed because of polio.³³

Society also had a role in family’s adaptation of leisure as solitary activities became the only forms of leisure for kids in a polio produced ghost town. “Staying In Can Be Fun,” emphasized an advertisement from Crest Stores selling games, puzzles, and books.³⁴ Paper dolls spiked in use during and after the Great Depression as an inexpensive form of leisure to participate in at home. Young girls in Wytheville read *Jack and Jill Magazine* and cut out paper dolls from Sears catalogue. Scholar Howard Chudacoff argues from sources in the Doll Oral History Collection that many young girls identified their dolls as companions and an extension of themselves. Companies replaced dolls wooden and metallic design with soft fabrics to better resemble the babies society expected they raise.³⁵ By 1943, comic book publishers distributed 125 titles to 25 million consumers. One mother “would bring [...] comic books and other books. She would put them in brown bags and bake them in the oven [to kill germs] and then drop

³² Barnett, August 6, 2002, POHC.

³³ Jean Lester, September 17, 2004, POHC; Eugene Warren, October 29, 2002, POHC.

³⁴ “National Foundation and Health Dept. Assure Citizens Every Possible Aid To Fight Polio Will Be Made Available,” *Southwest Virginia Enterprise*, July 21, 1950.

³⁵ Chudacoff, *Children At Play*, 126-158.

them in our mailbox.”³⁶ While reading books in person saw a surge in interest, hearing them created even more as the local radio station and Wytheville’s recreation commission worked together to assure kid centered programming throughout the summer.

The fear of contracting polio lead to rumors and attempts to control or contain the information about Wytheville’s epidemic. As cases mounted, townspeople attempted to contain information about polio in order to protect families and the community. The editor of the *Enterprise*, Jim Williams, kept a running tally of fatalities in an effort to stop the spread of exaggerated rumors running rampant via town gossip. “Get the Facts— Please Don’t Spread Rumors!” prefaced nearly every edition of the newspaper that summer. Several issues of the newspaper reprimanded rumormongers through editorials— if nothing would effectively end the epidemic, they could at least get the facts in order to take effective steps in the face of this challenge to family life.

As those fears intensified, townspeople abandoned communal forms of leisure emblematic of community ties. According to news reports and oral histories, at the height of the epidemic Wytheville was essentially a ghost town. When faced with the disease, families acted to protect themselves and their children. It is that self-protection that made community culture a casualty of the epidemic. In the summer of 1950 many of the typical places for childhood community were temporarily abandoned to safeguard children. Some businesses voluntarily closed like McWane Swimming Pool, local theatres, Greear Film Studio, and the

³⁶ Ashby, *With Amusement for All*, 270; Crockett-Stark, July 7, 2003, POHC; Lester, September 17, 2004, POHC.

Roller Rink.³⁷ Community pools were the first businesses to shut down during any polio epidemic because of the disease's erroneous association with water. The Millwald Theatre, one of the longest running "talkies" in the state of Virginia, was another form of communal leisure to close its doors to the public

Polio not only forced families inward, but the town too was isolated and forced to cancel celebrations and events on a regional scale. Townspeople cancelled large gatherings such as family reunions, the county fair and Lion's Club carnival, the prestigious Southwest Virginia Horse Show, Moose Lodge meetings, as well as the local Jaycees, the Future Farmers of America chapter, and high school sports.³⁸ Dr. Walter S. Newman, President of Virginia Polytechnic Institute, and L.B. Dietrick, President of the Institute of Rural Affairs, asked people from Wythe County not to attend their annual rural affairs conference.³⁹

With Wytheville's prominent location as a midpoint between the Great Lakes to Florida Highway, the highway's dedication committee planned a gigantic celebration for the highway in late July. In addition to being an editor, Jim Williams was instrumental in advocating

³⁷ Mr. and Mrs. Jimmie Kincer, November 21, 2002, POHC; "Health Official Issues Statement Relative To Polio," *Southwest Virginia Enterprise*, June 11, 1950; "National Foundation Giving Unstinted Support to Wythe," *Southwest Virginia Enterprise*, August 1, 1950; "Wythe Polio Treatment Center For Aid To Returned Patients Established Here," *Southwest Virginia Enterprise*, August 4, 1950; "Wytheville Passes 15th Day With No Polio Cases Reported; County Has Only 9 Over Past 15 Days," *Southwest Virginia Enterprise*, August 29, 1950.

³⁸ Lester, September 17, 2004, POHC; Sammy Veneziano, October 21, 2004, POHC; Zuber, March 17, 2003, POHC; "Polio Apparently On Decline-Latest Facts Told," *Southwest Virginia Enterprise*, June 14, 1950; "Many Notables to Attend Celebration marking Completion of Highway 21," *Wythe County News*, July 13, 1950; "National Foundation and Health Dept. Assure Citizens Every Possible Aid To Fight Polio Will Be Made Available," *Southwest Virginia Enterprise*, July 21, 1950; "Wythe Polio Treatment Center For Aid To Returned Patients Established Here," *Southwest Virginia Enterprise*, August 4, 1950; "March of Dimes Emergency Funds Sent To Six Virginia Counties; Wythe Gets \$16,174," *Wythe County News*, August 24, 1950; "Polio Relief Committee Is Now Giving Assistance To Many Families," *Southwest Virginia Enterprise*, August 25, 1950.

³⁹ "Gigantic Spraying Program Is Inaugurated-State Health Workers Hold Meet Here Today," *Southwest Virginia Enterprise*, July 25, 1950; "National, State and County Health Officials Meet Here Tues.; Several Polio Precautions Suggested," *Wythe County News*, July 27, 1950.

Wytheville's prominence among Great Lakes to Florida Highway Association. The celebration planned that summer honored an important economic lifeline and recognized the town's progress. Through his efforts, the planned commemorative festivities for the highway's inauguration were planned for the summer of 1950 in Wytheville. The committee expected thousands in delegations from five states with a ribbon cutting ceremony, parade, and an old-fashioned basket picnic. The highway committee ultimately canceled the commemoration. Polio usurped the planned celebration— bringing the town quite the opposite national attention.⁴⁰

Polio affected older youths as well as younger ones, and they too were restricted by the epidemic. The war on polio replaced the war in Korea in newspaper Wytheville headlines. Though eighteen men from the county enlisted the summer of 1950, the Virginia Selective Service issued a ban on recruitment in Wytheville because of the epidemic— a ban not lifted until late August.⁴¹ At such a pivotal point in the Cold War, the American government could militarily nor economically afford polio outbreaks in the armed forces. Such a ban on the draft in 1950 prevented the crippling of Uncle Sam's soldiers and, consequently, the war effort. These young adults, shunned by the national community, turned their attentions inward to the family for comfort, safety, and a sense of worth.

Since parents forbade children from venturing outside for fear of catching polio, and parents stayed in as much as possible to avoid bringing the virus home to their kids, the disease

⁴⁰ Arthur, "Wytheville's One Hundred and Fifty Years," *Wythe County Historical Review*, 1-3; "Many Notables to Attend Celebration marking Completion of Highway 21," *Wythe County News*, July 13, 1950; "State Health Department Team Making Study of Polio Situation In Wythe," *Wythe County News*, July 20, 1950.

⁴¹ "Gigantic Spraying Program Is Inaugurated-State Health Workers Hold Meet Here Today," *Southwest Virginia Enterprise*, July 25, 1950; "Wytheville Passes 15th Day With No Polio Cases Reported; County Has Only 9 Over Past 15 Days," *Southwest Virginia Enterprise*, August 29, 1950.

forced families to adapt their leisure lives. Radio became not only an important new source for news about the outbreak, but also for entertainment. "If you can say any good came from that summer," town resident Jean Lester remarked years later, "we learned to get along with our brothers and sisters quite well and our love for books and the radio."⁴² Announcers Sid Tear and Dickie Sanders became polio victims during the epidemic, with Tear actually announcing while bedridden.⁴³ With WYVE on for just a short while, and because many families were not wealthy enough to buy a radio, the information and entertainment it purveyed became a sought-after commodity. At this time, only fifty percent of the county population had electricity. One member of the community remembers her family did not own a radio, so her brother would cross some wires up with their radiator and get a primitive signal.⁴⁴ Radio programming specifically catered to the sick children of the epidemic. Kids would gather around the radio to hear stories read to them over the waves like *Story Hour with Mrs. Sharitz*, *Uncle Remus Stories*, personal interviews, and arts and crafts to do at home. Much like the bulletin board outside *The Enterprise* office, the radio kept up a running tally of polio cases. Families hoped they would not hear of other family members, friends, and neighbors reported among those rushed away. The indispensable nature of the programming, combined with the ghost town atmosphere, left many feeling radio was "our contact with the outside world. The radio was our connection to life."⁴⁵

⁴² Capitalization from the original. Lester, September 17, 2004, POHC.

⁴³ Wythe County Historical Society, "Untitled," *Wythe County Historical Review* 34 (1988), 20; Logan, *A Summer Without Children*, 46-7.

⁴⁴ Crockett-Stark, July 7, 2003, POHC.

⁴⁵ Kincer, November 21, 2002, POHC; Lester, September 17, 2004, POHC; "Recreation Commission 'Takes to the Air' As Entertainment During the Polio Epidemic," *Southwest Virginia Enterprise*, July 18, 1950; "Latest Facts

One resounding success in WYVE programming was Recko launched on July 25. Recko was a series of riddles, quizzes, puzzles, and a personal essay for children to complete in each issue of the *Southwest Virginia Enterprise* while parents confined them at home. Once completed, children would mail them in to the newspaper office who then chose winners each week. Afterwards, they announced those winners on the radio for all their friends to hear. Sponsored by the recreation commission of Wytheville, winners received prizes donated by local merchants in hopes of soliciting even greater patronage in this time of economic stagnation. The first winners were announced on July 28, approximately halfway through the epidemic.⁴⁶

Like shared leisure events, church attendance was also an important marker of community in Wytheville. Reminders of service cancellations, articles on congregation relief efforts, and frequent appeals to a higher power appear many times in the local newspapers and collected oral histories. On July 28, Mayor William Arthur asked the town to observe the next Sunday as a day of prayer in hopes of stemming the crippling tide. Referencing the many actions the local government took to absolve the town of disease, the Mayor proclaimed, "I had almost forgotten the most obvious place of all to seek that aid." Prominent religious leaders were consulted as a governing body to help with the town's plight, and many churches held special prayer services for the infected townspeople. Such prayers were often seen as the only thing ordinary parents could do to protect their children from a foe which was unseen,

About Polio Outbreak in County," *Southwest Virginia Enterprise*, July 18, 1950; "National Foundation Giving Unstinted Support to Wythe," *Southwest Virginia Enterprise*, August 1, 1950.

⁴⁶ Miriam Poole, October 3, 2002, POHC; "23 Polio Victims Returned To Homes; Total Cases To Date-80," *Southwest Virginia Enterprise*, July 28, 1950.

unheard, and at times, unfathomable as cases doubled from 41 to 80 between July 21 and July 28.⁴⁷

Religion has always held a pivotal role in mountain communities and picked up with renewed fervor since the Second Great Awakening carried the gospel through rural circuit riders in the 1820s. One of Appalachian Protestant Christianity's primary characteristics is its communal nature. Melinda Wagner argues, "Indicators of individualism are muted by other, more collective attributes of Appalachian religion. Indeed, it could be said that religion reflects submerging the self in the family of Christ, just as secular life reflect submerging the self to some degree in the collectivity." Because Appalachian religion emphasizes salvation as a continual process rather than a decisive moment, community becomes a central aspect of worship. Even the term "church" refers to the collective religious community rather than the physical "places of worship."⁴⁸

A communal definition of Appalachian religion should not lead us toward homogenization. Though the Appalachian Regional Commission reports most inhabitants are Baptist (21%), Catholic (13%), or Methodist (9%), there are over 11, 584 different sects within the Baptist denomination alone. With so many different belief systems, churches rarely cooperated with each other except in times of moral or social distress, as in opposition to liquor

⁴⁷ "23 Polio Victims Returned To Homes; Total Cases To Date-80," *Southwest Virginia Enterprise*, July 28, 1950; "Ministers Meet with Polio Relief Committee- Work Plans Completed," *Southwest Virginia Enterprise*, August 18, 1950.

⁴⁸ Melinda Bollar Wagner, "Religion in Appalachia," in *A Handbook to Appalachia: An Introduction to the Region*, Grace Toney Edwards, JoAnn Asbuy, Ricky L. Cox, eds. (Knoxville: University of Tennessee Press, 2006), 181-98; Deborah Vansau McCauley, "Religion," in *High Mountains Rising: Appalachian in Time and Place*, Richard A. Straw and H. Tyler Blethen eds. (Urbana: University of Illinois, 2004), 179-96.

sales, abortion, gambling, or helping with disaster relief and food pantries.⁴⁹ Wytheville's polio epidemic provided the needed medical duress that urged cooperation between the town's various church communities.

The role of churches in Wytheville and the reactions of believers during the epidemic were decidedly mixed. One commonality from the many oral histories of survivors in the town is their insistence Wytheville was essentially a ghost town. One family remarked, "They practically closed down the churches here. As far as I can remember they didn't even have church in some places."⁵⁰ Indeed, the annual Lutheran Meeting and services at Corinth Lutheran Church were cancelled, Reverend Gard cancelled worship services at the Main Street Christian Church with announcements in almost every issue of the newspaper, and Pastor Larrowe postponed the dedication of Kings Grove Methodist Church.⁵¹ As Town Manager Carter Beamer recalls, where not cancelled, "Attendance was down at churches [...] because they generally wouldn't bring the children."⁵² The Wytheville Presbyterian Church held a special prayer service, in coordination with other churches in the area, for the "Korean crisis"

⁴⁹ Martin B. Bradley, et al., *Churches and Church Membership in the United States 1990: An Enumeration by Region, State, and County Based on data Reported for 133 Church Groupings* (Atlanta: Glenmary Research Center, 1992); Bennett D. Poage, *The Church in Central Appalachia, 1990-2000* (Berea, KY: Appalachian Ministries Educational Resource Center, 2004); Bill J. Leonard, ed., *Christianity in Appalachia: Profiles in Regional Pluralism* (Knoxville: University of Tennessee Press, 1999), xv-xxv.

⁵⁰ Kincer, November 21, 2002, POHC.

⁵¹ "Polio Apparently On Decline-Latest Facts Told," *Southwest Virginia Enterprise*, June 14, 1950; "State Health Department Team Making Study of Polio Situation In Wythe," *Wythe County News*, July 20, 1950; "National Foundation and Health Dept. Assure Citizens Every Possible Aid To Fight Polio Will Be Made Available," *Southwest Virginia Enterprise*, July 21, 1950.

⁵² Beamer, August 8, 2002, POHC.

and the polio epidemic. An advertisement for the service in one of the local newspapers made a special request not to bring children for fear of catching the disease.⁵³

Nevertheless, Dr. Albert McGown, Director of the State Bureau of Communicable Disease Control, stated investigation into the epidemic in Wytheville continued with unsatisfying results. There were no significant findings, "common denominator," or unclean local situation to produce such high statistics. Such an indefinite statement from state authorities did nothing to help town spirit or community when cases climbed past 148 by August 15. Following this news, local grocery stores decided to close earlier, families postponed funerals, and several picnics, reunions, and other gatherings were cancelled.⁵⁴

Though polio struck mainly during the summer months, it still affected the school system. Because of numerous inquiries, Superintendent Fendall Ellis released a statement in mid-August saying the polio epidemic would dictate when school began. As a summer disease, cases were expected to drop off into autumn. With several children expected to be absent in recovery by the initial starting date of classes, and with the variable end date of the polio season, school was delayed until October 2, 1950.⁵⁵ Nevertheless, the real toll polio had on the education system were the afflicted students. For the lucky ones, children thought of this summer as a mini-vacation. Many throughout the county missed several weeks of school and had fewer chores due to parents' fear that overexertion rendered the body more susceptible to

⁵³ "Health Official Issues Statement Relative To Polio," *Southwest Virginia Enterprise*, June 11, 1950.

⁵⁴ "Two Cases Reported- Hope for Decline Seen," *Southwest Virginia Enterprise*, August 11, 1950; "Only One Polio Case Yesterday," *Southwest Virginia Enterprise*, August 15, 1950.

⁵⁵ McCaffery, "Polio Doctors Honored As Orthopedic Leaders," *The Roanoke Times*; "Polio Subsides, Two Cases From Entire County In A Five Day Period," *Southwest Virginia Enterprise*, August 22, 1950; "September 21 Announced As The Date For Opening Of Public Schools In Wythe County," *Southwest Virginia Enterprise*, September 5, 1950.

disease. The lasting effects of polio, however, were then visual reminders of the horror many families felt. Rebecca Huddle, a teacher during the epidemic, remembered, “seeing so many people walking down the street in braces.”⁵⁶ Jean Lester, a student at the time also committed to memory the lasting effects of polio: “When I got there [to school] that morning, my friend Joanne wasn’t there. My heart broke because she was a victim. But the empty seats,” she goes on to tell, “when they did the roll call, [there was an] empty seat where she should have been. My sister had a friend Judy and she didn’t get back to school either.”⁵⁷

1951: Return to Community?

While many aspects of community life returned... some things changed after the polio summer of 1950. Polio announcements returned to their lowest level in years with only 10 cases in 1951.⁵⁸ Families frequented stores and communal events. Though tourism returned and many expressed adulation for the efforts of Wythevillians, visitor numbers never recovered their pre-epidemic levels. While some children never returned, polio left others suffering the lasting effects of post-polio syndrome. Joanne survived her sophomore ordeal unscathed and went on to graduate with Jean in the coming years. Judy, on the other hand suffered from Post-Polio Syndrome. “She had a terrible time with it. She’s having all the pain and all the discomfort and all the crippling she had as a child and it’s so sad,” said her friend Jean.⁵⁹

⁵⁶ Huddle, September 20, 2002, POHC.

⁵⁷ Lester, September 17, 2004, POHC.

⁵⁸ Anderson, *Virginia Health Bulletin*.

⁵⁹ Lester, September 17, 2004, POHC.

During the summer of 1951, many aspects of pre-epidemic Wytheville returned; McWane pool reopened, the annual horse show noted favorable results with 135 entries, while the Wythe and Millwald Theatres again entertained the masses. In fact, polio may have reinvigorated some aspects of community after the outbreak. The summer of 1951 saw a boom in religious life. The decision to hold joint church services during the outbreak continued on into the summer of 1951, several churches expanded their buildings to accommodate growing congregations, and vacation bible schools returned from their polio-induced hiatus with over 270 children in attendance. The only looming bad news coming from this summer's papers were flower thieves "prowling" through the shadows.⁶⁰ Wythevillians, however, could find solace in the fact that these petal pilferers were the only ones pushing up daisies this summer.

Understanding life and community post-polio necessitates looking at the aftermath of the epidemic. How do you make sense of such a painful experience? What do citizens take away from this traumatizing outbreak? There are four retrospective articles on Wytheville's polio epidemic that may provide some insight into the matter from varying levels of perspective ranging from a nationally circulated *Life* article, to a special issue of the *Virginia Bulletin of Health*, to local analyses on how best to remember the events of 1950.

At the national level, Wytheville's epidemic was important as a model for what it means to not be afraid of polio. Journalist Albert Maisel wrote on behalf of *Life Magazine*:

⁶⁰ "Horse Show Opens Here Tonight- 136 Entries," *Southwest Virginia Enterprise*, June 15, 1950; "Six Local Churches Unite In Series of Union Services," *Southwest Virginia Enterprise*, June 8, 1951; "Bible Schools Report Enrollment Totals 270," *Southwest Virginia Enterprise*, June 29, 1951; "Flower Thieves Are Reported on the Prowl Here," *Southwest Virginia Enterprise*, June 5, 1950.

What happened in the tiny Blue Ridge mountain town of Wytheville, Virginia, last summer is of tremendous importance to you, even though you live thousands of miles away. Parents everywhere can now learn, in advance, what Wytheville parents learned the hard way: to sit tight, to stay calm, and not to fear polio.⁶¹

At the state level, the *Virginia Bulletin of Health* showed Wytheville's epidemic as a model for interagency cooperation and individual heroism, a move that will be discussed in Chapter Two.⁶² The town's story is presented in this article as just another polio epidemic offering lessons learned toward the race for a cure.

At the local level, however, things are remembered in a different light through a museum exhibit and small, personal memorials. The museum has recorded oral histories from residents at the time for visitors to hear what happened in their own words. The local Lutheran Church has a stained glass window commemorating victims of the epidemic. There is a small plaque memorializing the baseball team where Wither's field was once located. The field is now a park where a variety of community activities take place including Relay for Life and March of Dimes. These manifestations of remembrance

During an epidemic, leisure activities remain central to the way townspeople defined their wellbeing. Citizens mourned the loss of communal activities while they created individualized substitutions, especially for children. Reviewing the atomization of community life during this epidemic in the atomic age: mass forms of leisure such as radio and literature

⁶¹ Albert Q. Maisel, "Wytheville's Message: Don't Be Afraid of Polio," *Look Magazine* 15, no. 14 (July 3, 1951), 67-74.

⁶² Anderson, "The Polio Outbreak in Wythe County."

flourished, family life and individual leisure thrived at the expense of neighborhood life and communal leisure with public activities like baseball floundering into nostalgic memories.

Townspersons and officials dedicated to the public health reacted to polio with both offensive and defensive measures in an effort to protect themselves and their children. Next, I will show the medical infrastructure during this acute epidemic and what exactly informed the public health community to respond the way it did.

Chapter Two

Ghost Town Letters: Community and the Public Health Response to an Invisible Menace

A Community Responds

During the summer of 1950, Mayor Bill Arthur walked to his mailbox each day with resigned trepidation. The town held the attention of pharmaceutical salesmen, concerned citizens, medical quacks, and reclusive busybodies across the nation who mailed him their own theories and treatments for the invisible and indestructible microbe. Arthur had the unfortunate job of reading and replying to the flood of letters. Some said the virus came from the town's possibly tainted milk. Others felt polio was transmitted by tobacco worms or flies. One even proposed changing the name of the town to something without a "W" to avoid superstitious malice. As several of the letters exclaimed, "Why not try it?"¹ To free his mind from this scientific disputation, Arthur picked up copies of the day's paper from both the *Southwest Virginia Enterprise* and the *Wythe County News* only to encounter mounting tallies of the town's casualties. Such was life as a reluctant public health agent in a polio town. William "Bill" Arthur's correspondence provides a central framework from which to examine the theories behind polio and reactions by the community in response to this acute public health disaster.

¹ Valesca to William Arthur, R. William Arthur Papers, Unidentified Date, Kegley Special Collections of Wytheville Community College, Wytheville, Virginia.

Families responded by withdrawing their children from communal activities. Responses, though, were more complicated than simple withdrawal. Mayor Arthur was at the forefront in urging the community to act together to confront the epidemic, even if families wanted to hide away out of fear and even if a social stigma was attached to those who contracted the disease. This chapter traces the medical and public health responses to Wytheville's polio epidemic in order to show how community values mitigated the individual propensity for self-protection.

Fear of contagion led individuals/families to withdraw and neighbors to shun polio victims and their families. Eventually, the regional and national community shunned the townspeople of Wytheville in an effort to contain the disease. Reactions to polio illustrate the unreconciled notions of disease among an ordinary rural population and larger scientific medical authorities. The rapidly evolving information that *was* known to scientific authorities was not shared effectively with the general population. With such a lack in authoritative knowledge, average citizens consoled themselves with alternative, outdated, or folk theories of disease despite germ theory knowledge.

In this chapter, I illustrate the public health response by the community to Wytheville's polio epidemic during 1950 and the medical environment in which authorities conducted such actions. The 1950s public health measures involved government activities, use and creation of medical facilities, and a bit of religion. In explaining the public health response to the outbreak, this chapter shows the post-war environment of voluntary organizations, government involvement in public health initiatives, and the way local knowledge was still a powerful force in responding to disease even with the advent of modern medicine.

Despite public knowledge of the germ theory and medical expert understanding of the polio virus, there was widespread popular belief that something environmental was responsible for Wytheville's polio epidemic. Part of what makes polio so horrifying is that it has no treatment, even today. There is a vaccine as previously mentioned, but Drs. Jonas Salk and Albert Sabin did not discover it prior to Wytheville's epidemic. Polio is caused by a virus; 1950s citizens knew this much. Scientists and medical professionals debated the means of transmission even during the dissemination of the polio vaccine.²

Since the early 1900s, though water and milk were under investigation, scientists believed flies were blamed for the spread of polio.³ In 1941, three laboratories announced they had identified the virus on flies sampled from both rural and urban epidemics. One famous test case came when researchers left food out during an epidemic. They hoped that flies were carrying the virus and would leave evidence of this on the food.

By 1940s, scientists doubted the insect based theories. Researchers indeed found evidence of the polio virus on the food; but it was probably not transmitted by flies. Insecticides proved unsuccessful in a series of implementations throughout the country because polio is transmitted through contaminated fecal material.⁴ Nonetheless, these beliefs persisted even among experts.

² "Epidemiology of Poliomyelitis," *The British Medical Journal* 2, no. 4780 (1952), 379.

³ E.R. Hargreaves, "Poliomyelitis in Cornwall in 1949," *British Medical Journal* (1950), 879-83; "Epidemiology of Poliomyelitis," *The British Medical Journal* 2, no. 4780 (1952), 379.

⁴ John R. Paul, *A History of Poliomyelitis* (New Haven: Yale University Press, 1971), 292-8; Charles Armstrong, "Seasonal Distribution of Poliomyelitis," *American Journal of Public Health and the Nation's Health* 40, no. 10 (1950), 1295-1304.

The theory of person-to-person transmission continued to gain momentum through various experiments. In one such experiment, polio was found in the stool of 54 of 101 contacts and only 5 of 55 non-contacts living in the same immediate area. Several scientists began to believe that the disappearance of polio in the winter could be explained by nasopharyngeal cells producing greater secretions which acted as a protective barrier against the virus. The return of polio each summer was due to the absence of these secretions because of the warmer weather.⁵ Scientists mapped infected cases during an experiment in Baltimore around the same time as Wytheville's epidemic. The resulting map illustrated that incidents increased toward the center and decreased toward the periphery— circumstantial proof of person-to-person transmission. Additionally, research discovered from that same experiment showed polio infected blacks at a rate of 2.7 per 100,000 as opposed to 5.4 among whites. Investigators attributed the lower African American rate to the environment. Many believed since most blacks lived in the worst parts of towns and cities, they were exposed to polio earlier than whites and contracted milder forms of the disease.⁶

Nonetheless, while polio experts did seem to know that polio was spread by close contact with those infected, at the local level, Wythevillians living with the disease remained skeptical. Multiple theories regarding cause and transmission proliferated. Many felt the disease was environmentally based. In thoughts reminiscent of the 1800s, several people felt polio was caused by anything from temperature and the winds, to the ground and plants.

⁵ F.B. Gordon, F.M Schabel, Albert E. Casey, and William I. Fishbein, "Laboratory Study of the Epidemiology of Poliomyelitis," *Journal of Infectious Diseases* 82, no. 3, (1948), 294-301.

⁶ Thurber Fales and Matthew Taback, "Observations on the Epidemiology of Poliomyelitis: From 1950 Baltimore Epidemic," *Public Health Reports (1896-1970)* 67, no. 1 (1952), 47-52.

D.L. Barnett was a prominent Wythevillian and owned a local funeral home. During the epidemic, he used his hearses as ambulances when alternative transportation was unavailable to send polio patients to the hospital. Like many other citizens in Wytheville he was uncertain regarding polio's transmission and adhered to miasmatic theories of disease transmission, thinking, "it was just something in the air that settled certain places."⁷ In one of the many letters to Mayor Arthur during the epidemic, Peter Kaiser, a medicinal agriculture scientist asked to turn the epidemic in Wytheville into an investigation. For a fee, Kaiser hoped to track down the botanical or geological causes for the transmission of polio. He felt the disease was probably caused by "bad soil."⁸

The public health responses to polio by the community were the product of this complicated relationship between expert and local knowledge. Many local townspeople judged national and state officials' response disastrously inadequate. Officials adopted a wait-and-see approach feeling polio would run its course and be over in a few weeks as in other communities throughout the country. Many Wythevillians grew resentful of perceived abandonment and relied on themselves for help and support. Relying on local wisdom rather than recent scientific advances, they muddled through the best they could.

The first public health action taken by national and state public health officials was to gather top scientific and medical personnel in hopes of alleviating the town's plight. Officials from a variety of organizations met to review the situation: Albert S. McGown of the State Department of Health, Dr. Pope of the county public health department, Wagoner, the local

⁷ D.L. Barnett, August 6, 2002, transcript, Polio Oral History Collection (POHC), Wytheville Department of Museums, Wytheville, VA.

⁸ Peter W. Kaiser to William Arthur, August 4, 1950, R. William Arthur Papers.

NFIP chairperson, George C. Funderbuck, the NFIP area representative, as well as several local doctors and members of the county Ministerial Association. In mid-July the state health department sent additional specialists to assess the situation in Wytheville which included nurses, physical therapists, virologists, and epidemiologists. They arrived with assurances from the National Foundation for Infantile Paralysis of additional funds and physical therapists to help with recuperating patients.⁹

Town officials' mediation between expert and local knowledge left the local government scrambling to maintain credibility. Two of the town's most visible public health measures during the epidemic grew out of local beliefs about transmission: a water watch program and spraying campaigns. In case stagnant or unsanitary water was the progenitor for polio, town officials began chlorinating the water three times as much, while expediting construction of a water treatment plant already in progress.¹⁰ These actions seemed proper steps to take considering the beneficial effects such actions had in stemming the previously widespread cholera epidemics, whose origins were also perceived to be water-born or miasmatic/air-born.¹¹

"A major battle was fought in Wytheville yesterday," reported one *Southwest Virginia Enterprise* reporter, "and the thousands of dead victims as a result of the one day campaign

⁹ Members of the delegation included: Dr. Catherine Brewer, David Robertson (sanitation engineer), Virginia Whitsom (advisory nurse), Dr. Spikeman (virologist from University of Louisville), Dr. McCown (state epidemiologist) and others. "Work of Physicians Praised- Health Officials Meet and Review Local Situation," *Southwest Virginia Enterprise*, July 14, 1950; "National Foundation and Health Dept. Assure Citizens Every Possible Aid to Fight Polio Will Be Made Available," *Southwest Virginia Enterprise*, July 21, 1950; "Gigantic Spraying Program Is Inaugurated-State Health Workers Hold Meet Here Today," *Southwest Virginia Enterprise*, July 25, 1950.

¹⁰ Carter Beamer, August 8, 2002, POHC.

¹¹ Suellen Hoy, *Chasing Dirt: The American Pursuit of Cleanliness* (New York: Oxford University Press, 1995).

were too numerous to secure an accurate account.”¹² This dramatic post described the principle action taken by the local government against the polio outbreak. This initial offensive, one of many DDT spraying campaigns against area flies, was coordinated by the Wythe County Life Saving Crew (WCLSC). While many communities across the nation utilized aerial spraying or ground based fogging machines, the WCLSC opted for a more precise approach by mounting DDT tanks to their vehicles and spraying only potential breeding grounds like vacant lots, trashcans, dumps, creeks, and alleys. The WCLSC bolstered their manpower by requesting assistance from the Roanoke Health Department Crew and also borrowed two iron lungs and a hot pack machine to aid in the war on polio. With these additional resources, spraying campaigns continued on a weekly basis until the middle of September.¹³

Mayor Arthur received a letter from J.E. Chaney, a Major General in the United States Air Force during the course of the epidemic. Chaney attempted to convince Arthur to implement large scale DDT spraying due to the resounding success he experienced as a commander at Iwo Jima in World War II. A decorated veteran, Chaney was part of the American Expeditionary Force during World War I, Commanding General of U.S. Army Forces in the British Isles, and commanded all military forces during the invasion and occupation of Iwo

¹² “Gigantic Spraying Program Is Inaugurated-State Health Workers Hold Meet Here Today,” *Southwest Virginia Enterprise*, July 25, 1950.

¹³ “Health Official Issues Statement Relative To Polio,” *Southwest Virginia Enterprise*, June 11, 1950; “Gigantic Spraying Program Is Inaugurated-State Health Workers Hold Meet Here Today,” *Southwest Virginia Enterprise*, July 25, 1950; “Returned Polio Patients Receiving Treatment In Homes; 138 Cases Reported Thursday Morning,” *Wythe County News*, August 10, 1950; “County-wide Spraying Program As Extra Precautionary Measure Now In Progress,” *Southwest Virginia Enterprise*, August 8, 1950.

Jima in the Pacific theatre. This letter is illustrative of the link between the overseas war against other nations and the home front war against disease.¹⁴

More fully developed by scholar Edmund Russell, scientific advances in pest control and gas warfare encouraged mutual expansion during the Cold War. As scientists created innovative chemicals and distribution devices to kill potential enemies in the Cold War, those same breakthroughs were applied to the war on bugs and *vice versa*. Additionally, the language of pesticides and chemical warfare become synonymous. Instead of Communists and Nazis, people were fighting a war on bugs with cartoons and propaganda posters depicting America's foes as insects to be exterminated and vice-versa.¹⁵

Though officially disproven in the scientific community by 1950, past experience, prior widely publicized experiments, and the high incidence rate during the summer seemed to prove flies harbored the disease. The Crew targeted the town dump, streams, vacant lots, and alleys.¹⁶ "We had no idea whether that had any effect or not," the Town Manager explained, "but it made people see that we were doing something. Public officials need to be conscious that people are looking to them, and if they are doing something well-intentioned, even if it's

¹⁴ William R. Tapp to William Arthur, August 1, 1950, R. William Arthur Papers; J.E. Chaney to William Arthur, August 9, 1950, R. William Arthur Papers; James Eugene Chaney, Courtesy of the United State Air Force, Arlington National Cemetery Website, <http://www.arlingtoncemetery.net/jechaney.htm>.

¹⁵ War terminology not only included the fight against insects— but the war on polio as a whole. Parents enlisted in such this war through various fundraising, cleaning, and spraying offensives to fight this important war on the home front rather than the Korean War across the Pacific. Edmund Russell, *War and Nature: Fighting Humans and Insects with Chemicals from World War I to Silent Spring* (New York: Cambridge University Press, 2001).

¹⁶ "Health Official Issues Statement Relative To Polio," *Southwest Virginia Enterprise*, June 11, 1950; "Gigantic Spraying Program Is Inaugurated-State Health Workers Hold Meet Here Today," *Southwest Virginia Enterprise*, July 25, 1950; "Returned Polio Patients Receiving Treatment In Homes; 138 Cases Reported Thursday Morning," *Wythe County News*, August 10, 1950.

not effective, they're doing something, it's better than nothing."¹⁷ Indeed, these practical/psychological actions taken by the local municipal government occurred fairly early into the epidemic. As Eugene Warren, a local pharmacist's apprentice explained:

It became more and more evident that we were really in trouble, and without knowing what to do— or how to stop it, or how to get away from it— we were just stuck with it. You— you just couldn't pick up everybody and leave and you couldn't set the whole town on fire. So it [...was not] hopeless, but it was gettin' pretty close that way.¹⁸

After his busy day of filling prescriptions for antibiotics and sulfa drugs like chloromycetin and aureomycin (because antivirals were unavailable at this time), Warren went to the landfill with his coworkers to shoot mice and kill possible transmitters of polio, not to mention relieve the stress that accompanied life in an epidemic.¹⁹

The Medical Community

Fear in Wytheville was the product of an absence of a cure and lack of common understanding concerning the origins and transmission of polio. Scientific consensus held polio was often minor, widespread, and undiagnosed.²⁰ Due to the common initial symptoms polio has with other insignificant diseases, hypochondriacs in the epidemic were understandably plentiful. "Everybody who had any kind of pain during that period wondered if they might be

¹⁷ Beamer, August 8, 2002, POHC.

¹⁸ Sarah Colt, Transcript of "The Polio Crusade," American Experience, WGBH Boston, Public Broadcasting Service.

¹⁹ Eugene Warren, October 29, 2002, POHC.

²⁰ "Polio Apparently On Decline-Latest Facts Told," *Southwest Virginia Enterprise*, June 14, 1950.

getting polio,” remarked Carter Beamer, Town Manager of Wytheville during the epidemic.²¹ Furthermore, with the staggering number of cases during the outbreak, the medical infrastructure was woefully inadequate to handle the influx of polio cases.

For treatment in 1950, there were two clinics (Chitwood and Malin Clinics) and four town doctors: Drs. Ranny Chitwood, Charlie Graham, Brock Hughes, and C.D. Moore. Chitwood Clinic on Main Street was built fifteen years prior to the epidemic and with only eight-ten beds, this clinic was the only place in the county to test spinal fluid for the poliovirus.²² There were an additional eight doctors who moved throughout the county taking care of those families up in the mountains and hollows away from Wytheville’s urban streets. Physicians during that summer had to juggle potential polio patients with regular sick patients and accidents. One child remembers Dr. Charlie Graham making a house call for her ill grandfather. They had some toys and quilts in their backyard because their parents would not allow them in to town. After inquiring about a telephone and hearing the family had none, Dr. Graham said, “I don’t want anyone to find me for an hour. I’ve been up for days. That quilt is so inviting I want to take a nap.” Dr. Moore’s son remembers his father staying up without sleep for three to four days at a time.²³

Polio both preserved and disrupted the racial status quo in this Southern community. Scholar Andrea Patterson argues, “while microbiology of course did not bring an end to scientific or medical racism, it did, [...] initiate some remedies to the precarious state of black

²¹ Beamer, August 8, 2002, POHC.

²² Logan, *A Summer Without Children*, 19-26.

²³ *Ibid.*, 22.

health.”²⁴ As more and more people comprehended germ theory, inclusion of African Americans into medical services gradually replaced ideas of black biological inferiority.

Rather than adhere to this previous ideology, the NFIP encouraged segregation at the national level. President Franklin Roosevelt founded the Warm Springs Resort as a place to escape from hectic Washington politics. The facility admitted hundreds of fellow polio survivors in need of extensive rehabilitation. When Tuskegee Institute opened a polio ward in 1941 as part of an NFIP propaganda campaign to promote the black polio victim’s visibility, this opening was a direct response to Warm Spring’s whites-only admittance policy.²⁵ Realizing discriminatory state officials and laws hampered its mission to help polio patients regardless of “race, creed, or color,” the Foundation hired Charles H. Bynum as administrator of their new Negro Activities department in 1944.²⁶ At the local level, the NFIP assured its considerable funds were dispersed for both black and white medical expenses including treatment, transportation, equipment, and rehabilitation.²⁷

As the Wytheville epidemic progressed, town ambulances drove victims approximately 160 miles roundtrip to and from Roanoke, Virginia’s, Memorial Crippled Children’s Hospital. Drivers used hearses from Barnett’s and Porterfield-Minnick Funeral Homes when ambulances were unavailable, and made the trip two to three times per day throughout the summer.²⁸

²⁴ Andrea Patterson, “Germ and Jim Crow: The Impact of Microbiology on Public Health Policies in Progressive Era American South,” *Journal of the History of Biology* 42, no. 3 (2009).

²⁵ Naomi Rogers, “Race and the Politics of Polio: Warm Springs, Tuskegee, and the March of Dimes,” *American Journal of Public Health* 97, no.5 (2007), 784-95.

²⁶ Stephen E. Mawdsley, “Dancing on Eggs’: Charles H. Bynum, Racial Politics, and the National Foundation for Infantile Paralysis, 1938-1954,” *Bulletin of the History of Medicine* 84, no. 2 (2010), 217-47.

²⁷ “National Foundation Giving Unstinted Support to Wythe,” *Southwest Virginia Enterprise*, August 1, 1950.

²⁸ Logan, *A Summer Without Children*, 33; Beamer, August 8, 2002, POHC.

Mayor William Arthur remarked in a WYVE radio interview, blacks “faced polio under particular hardships.” Black patients with polio were repeatedly denied admission to Roanoke’s hospital despite local doctors’ attempts and were forced to make the approximately 600 mile roundtrip drive to St. Philip’s Hospital in the state capital of Richmond.²⁹

There were many psychological implications to consider, in addition to the physical manifestations of the disease. These psychological factors were probably happening in Wytheville because they were happening with patients in other polio outbreaks. The psychological and emotional toll of polio could be as damaging as the physical. Once in the hospital, patients were isolated from loved ones and doctors did not administer medication to dull the excruciating pain of polio, fearing the risk of lung paralysis. Isolation coupled with pain while confined to bed would last two to four weeks. In such an environment, polio scholar and patient Daniel Wilson illustrates normal urine and bowel movements were celebratory events when simply turning over in bed was a laudatory victory.³⁰ An affirmative diagnosis of the disease left feelings of guilt in both the child and parent— wondering if they should or could have done anything to prevent polio. Many young men felt polio attacked their masculinity as the disease left them impotent for up to one month.³¹

With growing numbers of polio victims and patients returning home, families needed additional support. To supplement efforts at the national level, and as evidence of community engagement, local citizens and organizations rose to meet the needs of incapacitated patients

²⁹ Logan, *A Summer Without Children*, 39.

³⁰ Daniel J. Wilson, *Living With Polio: The Epidemic and Its Survivors* (Chicago: University of Chicago Press, 2005), 35, 59.

³¹ Wilson, *Living With Polio*, 31, 59.

and poor families. American Legion Post 9 donated wheelchairs, crutches, and walkers to those in need, while the Red Cross received many donations of books for shut-in children.

Furthermore, the Committee to Aid Stricken Polio Families (CASPF) formed with an initial \$10,000 donation from the Wytheville Knitting Mill. Morriss Freezer Company followed suit with an additional \$1,000.³²

Citizens opened a polio treatment center in downtown Wytheville on September 5—further indication of medical community commitment. Eighteen members of six town civic organizations raised money and erected the Physical Therapy Center, or Crippled Children’s Clinic, in the basement of the Veterans Memorial Building on Main Street for all returning polio patients. The clinic saw 68 patients on opening day. The Spartan concrete basement held only tables, mirrors, walkers, parallel bars and dividers. The Crippled Children’s Clinic continued to see an average of 70 patients under Drs. Ripley and Bray of Roanoke, and on July 20, 1951, Roanoke Memorial returned the Life Saving Crew’s iron lung formally ending an over-capacity of polio patients in their children’s ward.³³ For those too incapacitated to attend sessions at the Crippled Children’s Clinic, the NFIP created a home care program termed “Parents in White.”³⁴

³² “Legion Offers Service, Public,” *Southwest Virginia Enterprise*, June 8, 1951; “Committee to Aid Stricken Polio Families is Formed; \$10,000 Gift is Announced,” *Southwest Virginia Enterprise*, August 15, 1950.

³³ The Crippled Children’s Clinic was run by Drs. Gayle and Ripley from Roanoke, local doctors Graham, Mangus, Moore, Chiwood, Malin, and Hughes, and physical therapists Clanton, Phipps, Whitmore, Wheeler, Golsdby, Dickey, and Malone. “Committee to Aid Stricken Polio Families is Formed; \$10,000 Gift is Announced,” *Southwest Virginia Enterprise*, August 15, 1950; “Polio Relief Committee is Now Giving Assistance to Many Families,” *Southwest Virginia Enterprise*, August 25, 1950; “70 Attend Polio Clinic- 35 Were Discharged Wed.,” *Southwest Virginia Enterprise*, August 10, 1951.

³⁴ Logan, *A Summer Without Children*, 109.

For some polio victims, rehabilitation and braces became a way of life long after the polio epidemic. Resident Rebecca Huddle remembered, “seeing so many people walking down the street in braces.” Another resident remarked, “There were a number of children that had survived and had withered limbs. I didn’t realize until I became a young adult that that wasn’t as common in the outside world.”³⁵

Despite the quick erection of the rehabilitation clinic and the great support it provided to polio patients, the transition from hospital to home could be as traumatic as the transition which forced them into the hospital in the first place. How would family, friends, and community members react— having been quarantined for so long in an isolation ward? Kids forged friendships with fellow patients recovering from polio who knew what they were going through; but how would their old classmates react to their recently acquired leg braces, crutches, or iron lungs? Also, some patients came from poor families who would not easily relinquish the extra toys, foods, facilities, and attention provided by the NFIP and the hospital’s polio ward.³⁶

Response in Context: Outside Support and Ostracism

The National Foundation for Infantile Paralysis (NFIP) was a larger national community in which the smaller local community of Wytheville actively engaged during the summer of 1950. Organizationally, the NFIP was a national group with over 3,000 local branches filled with volunteers managed by a central office. At the head of that office was Basil O’Conner, old law

³⁵ Ibid., 114.

³⁶ Ibid., 132.

partner of President Franklin Roosevelt. The NFIP revolutionized fundraising through the March of Dimes campaigns by engineering a hierarchy of volunteers with a foundation in local chapters to raise money and lend aid to those diagnosed with polio. Rather than appealing to wealthy individual donors or groups, the March of Dimes emphasized working and middle class donations in small increments. The framework was such a success, the organization covered expenses for nearly every polio patient in the Wytheville epidemic and supplemented salaries for medical professionals.³⁷

Throughout the course of the epidemic, mothers and wives were relegated to supporting positions in the war against polio as rehabilitation nurses, clean home maintainers, and fundraisers. The Junior Women's Club, lead the way in organizing and donating to the Crippled Children's Hospital fundraising initiative (only a few months prior to the notorious outbreak) to help pay for a new children's ward at the Roanoke Hospital. Ironically, in addition to surpassing the suggested donation ten-fold, children from Wytheville occupied the majority of beds during that summer.³⁸

The organizational acumen of the group's leaders, in conjunction with the marketing campaign which emphasized showing crippled children in daily advertisements, worked in conjunction with the NFIP's underlying structure to create a successful organization to combat polio. As the NFIP's fundraising arm, the March of Dimes was an event held on President Roosevelt's birthday to raise money for research toward a cure and care of polio patients. The

³⁷ David Sills, *The Volunteers: Means and Ends In A National Organization* (New York: Arno Press, 1980), 12-3; Oshinsky, *Polio*, 79-91.

³⁸ Logan, *A Summer Without Children*, 9; Oshinsky, *Polio*, 79-91; "Crippled Children's Drive In Wythe Totals \$15,995.67," *Southwest Virginia Enterprise*, May 23, 1950.

marketing campaign, through dramatic pictures of polio victims, helped garner increasing sympathy from local volunteers and movie stars.³⁹

Perhaps the most beneficial way the NFIP helped mitigate the effects of the polio epidemic was by showering medical establishments and individual families with money to defray expenses. Approximately halfway through the summer epidemic, a man named Gene Thomas wrote to the Mayor from Washington D.C. offering pro bono theatre shows by his troupe to benefit polio victims. In dozens of other letters individuals offered the mayor small contributions to help victims.⁴⁰ However, all of these proved unnecessary because of the generous support from the NFIP. Annually, the NFIP provided 72,000 patients across the country with \$26,000,000.⁴¹ Expenditure reports show the NFIP gave over \$16,174 to the county chapter for distribution to local patients, \$17,000 to supplement staff salaries at Virginia Medical College, and \$11,000 to the state health department.⁴² By August 24, 1950, the NFIP sent an additional \$10,000 to the county chapter to help with continued care of patients.

In addition to the funds sent to individual families, the NFIP also paid for the temporary employment of fifteen Red Cross nurses, two physicians, and one physical therapist to supplement the beleaguered staff at Roanoke Memorial.⁴³ Local doctors often took advantage of the NFIP funds while zealously providing for their patients. Often, doctors would label

³⁹ David Rose, *Images of America: March of Dimes* (Charleston, SC: Arcadia Publishing, 2003).

⁴⁰ Gene Thomas to William Arthur, August 18, 1950, R. William Arthur Papers; W.L. Lazenby to William Arthur, August 8, 1950, R. William Arthur Papers.

⁴¹ Wilson, *Living with Polio*, 64.

⁴² This number is a testament to the vast discrepancy of cases in Wytheville compared to surrounding counties such as Bland, \$1,138, Carroll, \$1,276, Scott, \$2,141, and Wise, \$2,315. "Va. Health Dept. given \$11,000 from NFIP, 1950 for Wytheville Area," *Southwest Virginia Enterprise*, January 2, 1951.

⁴³ "National Foundation Giving Unstinted Support to Wythe," *Southwest Virginia Enterprise*, August 1, 1950.

patients with only suggestive symptoms as having poliomyelitis so the NFIP might absorb hospitalization and treatment expenses.⁴⁴

While the NFIP helped manage the disease, townspeople appealed to a higher power to prevent the disease. One community effort to unite in the face of such a public health threat was an appeal to the Almighty. Indeed, it seemed quite logical to most of Wytheville's population in 1950 that with the presence of an invisible killer, and mixed messages about transmission, that one must appeal to an equally mysterious and powerful potential cure. While many abandoned church for fear of catching the disease, others blamed the disease on divine punishment. The day before the first of many massive DDT spraying campaigns in Wytheville, an old-time Methodist tract was sent to the mayor from a nearby county; it advocated praying rather than spraying to combat the disease. "An Old Time Methodist Love Feast Holy Ghost prayer meeting will do more good than all the DDT spraying can do. TRY IT AN SEE!"⁴⁵ Another, more damning, curse-filled declaration addressed to Mayor Arthur and other "delusional lunatics [sic]" called the mainstream tactics to prevent polio, quackery.⁴⁶ This particular mountain preacher blamed the disease on the recently opened ABC Liquor Store.

Such an appeal obviously had some effect. The mayor issued a special letter to the citizens of Wythe County, requesting the last Sunday in July as a day of prayer in hopes of stemming the crippling tide. In response, the area churches were party to public health meetings and held joint services throughout the summer to pray for victims.⁴⁷

⁴⁴ John R. Paul, *A History of Poliomyelitis* (New Haven: Yale University Press, 1971), 311.

⁴⁵ Capitalization in the original. Lewis N. York to William Arthur, July 19, 1950, R. William Arthur Papers.

⁴⁶ Willie Moore to William Arthur, Unidentified Date, R. William Arthur Papers.

⁴⁷ "Citizens Asked To Observe Sunday As A Day of Prayer," *Southwest Virginia Enterprise*, July 28, 1950.

Dozens of letters were written to Mayor Arthur to provide help and information about polio. While I reference some of these letters earlier throughout the chapter, I now provide others to indicate the wide knowledge of Wytheville's predicament and as further evidence of limited authority of medical expertise when a cure was unavailable. Both provided an opening for local folk knowledge and unorthodox scientific knowledge. Furthermore, when one writer to Mayor Arthur suggested a mysterious "Substance X" transmitted the virus through mothers' milk and tainted cow's milk, the theory significantly affected the rural agricultural based economy as people refused to buy local dairy farmer's milk.⁴⁸

Insects continued to be widely considered the main mode of transmission during the 1940s due to a widely publicized series of laboratory experiments. Because polio climaxed during the summer months, many agreed that since insects reproduced and proliferated during the summer as well, the two connected. This made sense to a practical country folk who yearned for answers, and was thought to be backed up by the latest scientific experimentation. The eradication of flies served three overlapping objectives: to kill the polio virus flies might be carrying; to kill flies as harbingers of filth and evidence of miasmatic theories of transmission; and simply to exert their efforts to do something tangible.⁴⁹

One letter writer asked the Mayor whether there was a substantial tobacco industry in region, hypothesizing that tobacco worms transmitted polio. If so, the writer suggested treating with a flaxseed poultice and Epsom salts.⁵⁰ Another suggested renting a fogging

⁴⁸ John Kevlock to William Arthur, July 28, 1950, R. William Arthur Papers.

⁴⁹ Suellen Hoy, *Chasing Dirt: The American Pursuit of Cleanliness* (New York: Oxford University Press, 1995).

⁵⁰ Miss C.A. Johnson to William Arthur, August 5, 1950, R. William Arthur Papers.

machine to clear away the insects, as had a similar town in New Jersey.⁵¹ Consensus, however, advocated the chemical pesticide DDT due to many successful uses including one writer named William Tapp who saw the efficacy of DDT in combating disease in Puerto Rico.

The desire for active efforts to stop the epidemic was as much a response to seemingly inadequate government measures as ineffective scientific-medical communication. While tension surrounded the *transmission* of polio and decisions to combat its spread, differing methods of *treatment* were offered to the Mayor in hope of alleviating the blight on the town's children and maybe even turn a profit in the process. Local peddlers sold asafetida pouches like an amulet was thought to keep disease at bay. These small bags of herbs worn around the neck were popular folk remedies familiar to townspeople since its origination with Pennsylvania Dutch settlers in the early 1800s. Another folk method involved a series of Jello meals— a different color for each meal.⁵² Scientific scholar Michael Baum remarks on the line between orthodoxy and quackery when he comments, “The hypothesis that sparks from unaccountable hunches and achieves a pleasing form or agreeable order is not neutral but is an act of creation.”⁵³ Wythevillians wanted an active role in achieving stability and bringing their town back to a state of normality.

Scientist Alfred Roskamm Ross pushed the Mayor to allow clinical trials of his treatment in Wytheville. Dr. Ross' method involved the injection of silver into nerves to combat

⁵¹ Page? Stelle to William Arthur, July 30, 1950, R. William Arthur Papers.

⁵² Linda Logan, *A Summer Without Children: An Oral History of Wythe County, Virginia's 1950 Polio Epidemic* (Wytheville, VA: Town of Wytheville Department of Museums, 2005), 67, 71.

⁵³ Michael Baum, “Quack Cancer Cures or Scientific Remedies,” *Journal of the Royal Society of Medicine* 89 (1996), 543-7.

paralysis.⁵⁴ Such an acute epidemic offered a prime test ground for pharmaceuticals in the ongoing crusade against infantile paralysis. A man named R.B. Lewis wrote to Arthur supporting the Jungebult method of preventing and possibly treating polio. Originally identified by scientist C.W. Jungeblut through injections in Rhesus Monkeys, he found Vitamin C to produce beneficial effect. Acknowledging the dubious nature of the claims, Lewis wrote to at least tell mothers to provide children with one glass of orange juice per day; “It is so easy, why not try it?”⁵⁵

Alternatively, several writers implored Mayor Arthur to advocate the Koch method of treatment for his citizens. An article in the *Toronto Daily Star* reports on the successful treatment of Mary Lou Barnes, an Ohio State 19 year old using the Koch method. Developed by Dr. William F. Koch and produced by the Christian Medical Research League, the treatment involved injections of glyoxylide, an oxidation catalyst, to remove the paralysis of polio patients. The doctor who administered glyoxylide to Barnes was on an impromptu vacation and refused disclosure of his name to escape the scrutiny of his peers. Blacklisted by the American Medical Association, glyoxylide was considered ineffectual and its developer inferior to allopathic practitioners. An anonymous “Fellow Sufferer” wrote to the Mayor advocating the Koch Treatment after reading an article on the Wytheville polio epidemic in the *Chicago Tribune*.⁵⁶

Two similar alternative treatments met with harsh reception by the scientific/medical establishment only to have increasing success and fame in local communities across the nation:

⁵⁴ Alfred Ross to William Arthur, August 16, 1950, R. William Arthur Papers.

⁵⁵ R.B. Lewis to William Arthur, R. William Arthur Papers.

⁵⁶ A.J. Smith to William Arthur, July 27, 1950, R. William Arthur Papers; Harold Greer, “Co-ed’s Swift Recovery Mystery Even To Doctor,” *Toronto Daily Star*, August 22, 1949; “A Fellow Sufferer” to William Arthur, July 27, 1950, R. William Arthur Papers.

chiropractic and the Kenny Method. After reading about Wytheville's epidemic in the *Knoxville News Sentinel* one Tennessean advocated chiropractic adjustment to treat polio because, he argued, paralysis resulted from constricted spinal nerves. The writer urged Mayor Arthur to write to Spears Chiropractic Sanatorium or the Palmer School of Chiropractic for advice. Another writer suggested chiropractic adjustments to combat polio paralysis due to the great success one practitioner had in the D.C. area. In the letter, he also claimed polio and its subsequent paralysis resulted from pressure on the nerves and spinal cord. The pressure, he elaborated, was caused by contraction of the muscles from overexertion, the climate, falls, and/or cooling off too quickly. The writer also mentioned a case where a child actress from California was treated by a chiropractor and became the poster child for the March of Dimes. Though a friend of a chiropractor, the writer exhorted the mayor to keep an "open mind and investigate everything from both sides before passing [...] judgment. Of course there are incompetent chiropractors, [however,] I think that can be said for some people in every profession."⁵⁷ This concluding statement alludes to the negative publicity chiropractic garnered among allopathic practitioners. Though chiropractors had superior expertise with the principle targets of polio (muscles and the spine), their harsh rhetoric, and claims of a cure for polio and cancer kept them increasingly marginalized by mainstream family doctors. The lasting effects of polio, now known as post-polio syndrome, allowed chiropractors back into the fight against the disease.

The Kenny method of treatment, though also scathingly condemned by allopathic medical practitioners and the scientific medical establishment in the beginning, became the

⁵⁷ Cora Ruth Webb to William Arthur, August 19, 1950, R. William Arthur Papers; A.L. Harr to William Arthur, July 27, 1950, R. William Arthur Papers.

standard route of treatment for many polio patients in Wytheville's epidemic due to its practical results at alleviating pain and restoring motion to previously incapacitated limbs. Prior to the appearance of the Kenny Method, management of poliomyelitis' symptoms was firmly grounded in static/observational approach. By 1916, Dr. Robert Lovett set out stages for the disease, each associated with a plan to manage polio symptoms: acute, convalescent, and chronic. Acute polio required bed rest and quarantine followed by physical therapy and warm baths. Convalescent polio required massage, heat, and electricity with proper training in leg braces. Chronic polio could require tendon/nerve transplants, exercise, or even depression prevention. Despite U.S. Public Health Service advice against it, doctors made prolonged splinting of polio induced paralysis of the limbs a priority.⁵⁸ Sister Elizabeth Kenny's technique involved stretching the limbs manually and bathing in Epsom salts. This Australian bush nurse's technique collided with the immobility advised by American doctors. Both the nurse and her unique practice received harsh reception when Sister Kenny sailed to the United States offering health and hope to recently crippled children not recovering from standard treatment. Time after time, Kenny and her science proved better than immobility until finally American doctors had to accept the practice, if not the practitioner, into their system.⁵⁹

⁵⁸ Paul, *A History of Poliomyelitis*, 326, 338-9.

⁵⁹ Naomi Rogers, "Science Has Its Own Stories: Elizabeth Kenny, Polio and The Culture of Medicine," *Social History of Medicine* 21, no. 1 (2008), 145-61; Victor Cohn, *Sister Kenny: The Woman Who Challenged Doctors* (Don Mills, Ontario: Burns and MacEachern Limited, 1975); "Sister Kenny: Australian Nurse Demonstrates Her Treatment for Infantile Paralysis," *Life* (September 28, 1942), 73-77.

Community Efforts and Self Protection

Since 1950 preceded the construction of Interstates 81 and 77 which now bypass Wytheville, passersby had to travel through town. The threat of polio led them to drive with windows rolled up and handkerchiefs pulled over their mouths.⁶⁰ One wealthy southern vacationer from Athens, Georgia wrote to the Mayor expressing his condolences on behalf of “the many Americans who [...] toured through and visited” Wytheville many times. The former visitor concluded his letter, “Because I have two grandbabies in my immediate family and there might be a possibility of germs passing through the mails, I will not consider it discourteous if you refrain from replying to this letter. In fact, I think it will be better that way.”⁶¹

Many of the surrounding communities refused to be associated with Wythe County for fear of a similar fate. The Mayor of Radford implored Wytheville administrators to keep their infected out.⁶² As many survivors remember, the silence polio created with the absence of crowds and busy streets made the almost constant sound of ambulance sirens more piercing.⁶³ D.L. Barnett, the funeral home owner pressed into ambulatory service, received a letter from the Mayor of Pulaski forbidding ambulances from stopping in his county. The only gas station between Wytheville and Pulaski had a sign outside barring entrance to people from the town. While the Mayor of Salem did not go as far as to bar entry to his town, he requested ambulance sirens be turned off.⁶⁴ To solve such problems when leaving Wytheville, some would change their license plate tags to communities other than Wytheville for service, while others

⁶⁰ Mr. and Mrs. Jimmie Kincer, November 21, 2002, POHC.

⁶¹ Robert R. Gunn to William Arthur, August 22, 1950, R. William Arthur Papers.

⁶² Jen McCaffery, “Polio Doctors Honored As Orthopedic Leaders,” *The Roanoke Times*, January 21, 2006.

⁶³ Rebecca Huddle, September 20, 2002, POHC.

⁶⁴ Barnett, August 6, 2002, POHC; Alice Dehart, July 24, 2003, POHC.

demanded silence from the family with regards to their original home or face exclusion by the present town.⁶⁵

Meriflo Stephens remembered the same sight when his mother contracted polio. When Stephens' family walked down the street, others would cover their mouths and cross to the opposite side. For the same reasons, his mother recollected how her doctor stayed just long enough to deliver her baby and made a hasty retreat.⁶⁶ Another polio patient also remembered the stigma attached to having a family member with polio: "We had no friends! No one would speak to us. They were afraid they would get it."⁶⁷ Against the urgings of public health authorities due to the greater risk of spreading the disease to other communities, families fled to Claytor Lake and Hungry Mother State Parks to isolate their children for the summer.⁶⁸

With the events of 1950 in the past, polio and its lasting effects were still a big part of people's everyday lives. In 1951, Polio insurance advertisements began to appear in anticipation for another summer polio outbreak that never materialized. However, final numbers from the past summer's epidemic account for approximately 189 cases of polio, many of which were paralytic, and 23 deaths in a community of only 5,000. The epidemic of the previous summer may have influenced several public health measures during 1951. On June 29, the local government adopted a town-wide spraying ordinance which required weekly spraying of all streets and alleys, and urged citizens to spray problematic private areas. The

⁶⁵ Arraga Young, September 26, 2002, POHC; Ed Zuber, March 17, 2003, POHC.

⁶⁶ Meriflo Stephens, "Polio Summer," *Virginia Quarterly Review* 79, no. 2 (2003), 320-4.

⁶⁷ Annie B. Crockett-Stark, July 7, 2003, POHC.

⁶⁸ Beverly Hoch, "The Polio Town: Wytheville, Virginia 1950," *Wythe County Historical Review* 61 (2002), 10-17; Barnett, August 6, 2002, POHC.

police and health department launched periodic sanitation inspections in hopes of enforcing this ordinance.⁶⁹ While a controversial decision in many communities throughout the United States, Wythe County decided to allow optional fluoride treatments in schools starting in 1952— a decision which was met with considerable approval. Health professionals investigated local streams and creeks as a possible source of the epidemic and this early link between water and polio probably catalyzed the town’s move to construct a water treatment plant. This thinking may also apply to bids for the erection of police and fire departments during the middle of the epidemic. Additionally, to help in diagnoses of potential child problems, the county health department began holding well baby clinics every two weeks.⁷⁰

After the epidemic, the Virginia Association of Physical Therapists asked Mayor Arthur to provide some recommendations from his insights during the epidemic. Paraphrased from his response letter, Arthur gave five suggestions:

1. The state health department should assume leadership and illustrate that leadership in a positive way. A neutral or negative approach is disastrous.
2. The state department should come into the community with definitive plans, and such a plan should be given as orders instead of suggestions.
3. There should be a central person or group to limit contradictory statements and stories.
4. There should be a fact-finding committee to quell rumors.

⁶⁹ “Spraying Program in Wytheville Being Carried Out by Town Officials- Citizens Asked to ‘Do Their Part,’” *Southwest Virginia Enterprise*, June 29, 1951; “Sanitation Inspections to be Made by Town Police In Cooperation with Health Department,” *Southwest Virginia Enterprise*, August 10, 1951.

⁷⁰ “Fluoride Treatment of Teeth to be Offered Local School Children,” *Southwest Virginia Enterprise*, June 6, 1951; “Plans for Construction of Sewage Plant to Start At Once,” *Southwest Virginia Enterprise*, June 8, 1951; “Well Baby Clinic Held Every Two Weeks,” *Southwest Virginia Enterprise*, July 31, 1951.

5. Speculation should not be permitted by any officials.⁷¹

The polio epidemic in Wytheville illustrates the impact a particular disease had on a particular community. The concluding remarks by the Mayor on some of the many difficult lessons learned from the summer-long nightmare adequately summarized the complications that resulted from the medical responses to the epidemic. In the end, the community pulled together and local knowledge surfaced in the face of medical knowledge limits. The miscommunication also contributed to the coming tensions and mistrust when townspeople realized polio disrupted not only community life, but also business and financial relationships. As we shall see, the rising mistrust is vividly illustrated when families were forced to juggle their own personal wellbeing and that of their families with this culture of consumerism and its importance in post-World War II American society.

⁷¹ William Arthur to R.W. Jessee, December 6, 1950, R. William Arthur Papers.

Chapter Three

Ghost Town Turmoil: Community and the Commercial Response in the Face of Contagion

Wytheville's Economy

While the previous chapters illustrate how a community responded to a polio epidemic in 1950 through protecting personal/family wellbeing and adopting public health measures, this chapter looks at how ordinary townspeople also defined “protection” in economic terms. For some Wythevillians, economics demanded that the community stay open. Others, however, closed businesses in an effort to stop the epidemic. A portion of Wythevillians refused to believe the initial cases of polio were cause for alarm. With only five or six reported cases, one citizen remembered a radio announcer from WYVE mocking the hysterics of folks who thought they had been infected believing they had the disease. A week later, the announcer’s son contracted the disease. As cases increased, Dr. C. F. Pope, a local dentist and public health director for the county, closed McWane Swimming Pool. Other local leisure sites voluntarily followed suit. The Millwald Theatre, the bowling alleys, and the skating rink all temporarily closed. These closings, meant to protect citizens, also threatened the livelihood of business proprietors. Businessmen who felt they could not close down, like the downtown clothing, hardware, grocery, and five-and-dime stores remained open or adapted.

The economic basis for 1950s Wytheville was a complementary combination of agriculture, commerce, and tourism. Theories of polio’s transmission threatened the livelihood of many farmers. Merchants, businessmen, and store owners struggled to maintain sales to a

growing local population unwilling to leave their homes for fear of infection. As tourism dried up, the community's economy suffered.

The majority of employed persons worked in the agricultural and retail trades that supported agricultural life. Many families lived off what they produced themselves through subsistence farming or working on one of several large farms bordering town or in the surrounding county. Citizens from the area exported cattle, cabbage, grains, and even minerals like lead and zinc vital to the nation's war industry during World War II. Businesses like R.P. Johnson & Sons (agricultural machinery), Kincer-Miller Hardware, and Hobert N. Grubb (electrical supplies) catered to an agricultural citizenry. Stores like Crest, Leggett's, and Martin's Clothes attracted families intimately tied up with the consumerism of the 1950s. There were also larger industries in the county that employed masses of citizens like a cannery, knitting mill, and freezer company.¹

In the surrounding countryside families relied on commercial farming supplemented by raising dairy or beef cattle. Agricultural business took a severe hit through the course of the epidemic. As discussed in the previous chapter, while some thought the tobacco industry may be ground zero for polio, others thought milk might transmit the disease. Jean Lester, a resident at the time remembers, "Our neighbors, the Street family, had a dairy farm and the trucks wouldn't pick up, so the milk was poured out."²

¹ National Register of Historic Places Registration Listing, United States Department of the Interior, National Park Service, Kegley Special Collections, Wytheville Community College; U.S. Department of Commerce, "Characteristics of the Population."

² Jean Lester, interview by Linda Logan, September 17, 2004, transcript, Polio Oral History Collections (POHC), Wytheville Department of Museums, Wytheville, VA.

Though largely an agricultural center, the town's economy had another side. Primarily during the summer, Wytheville was an economic and cultural tourist hub. The town was located at the intersection of five major highways and was the midpoint of the new Lakes to Florida highway system that connected the mid-west states, down the Appalachians, to the sun-belt south. Strategically placed, the town became a summer tourist destination after the war.

The years following World War II were a pivotal point in American history was the climax of middle-class family vacations. The history of the town illustrated what scholar Susan Sessions Rugh calls the commodification of the summer vacation. Technological innovations in transportation infrastructure and the wide availability of the car made possible and practical the heyday of middle class family vacations from the 1940s through the 1960s.³

The town sported numerous entertainment facilities that catered to the influx of Southerners seeking the cooler mountain air. A tourist school was established in June of 1949 to help sell Wythe County's attractions; it stressed the three "R's" of the tourist trade: "remember, recommend, [and] return." Sponsored by the town, bright red buses with large carbide lamps for travel at night began excursions by 1910 to vacation spots like Horseshoe Bend and Foster Falls, and hotels along Nye and Wyrick Springs known for their medicinal properties. When not staying at one of these healing springs, visitors would stay at one of Wytheville's six hotels or sixteen boarding houses.⁴

³ Susan Sessions Rugh, *Are We There Yet?: The Golden Age of American Family Vacations* (Lawrence: University Press of Kansas, 2008).

⁴ "Tourist Information School to be Held for the Purpose of Selling Wythe County Attractions," *Southwest Virginia Enterprise*, June 3, 1949; "Program for Tourist School Announced," *Southwest Virginia Enterprise*, June 7, 1949; Arthur, "Wytheville's One Hundred and Fifty Years," 1-3; Inter-Mountain Telephone Company Directory,

These were not the only signs of Wytheville's growing prosperity. Most oral histories collected from townspeople during this time remember available parking on Main Street was virtually nonexistent as shoppers browsed window displays and searched for the most recent bargains. Wytheville's commercial district expanded from 30 stores in 1914 to 132 in 1954. The Town Council approved an ABC store within town limits in September of 1949 though not without considerable controversy. Against arguments from many different religious groups, town officials agreed to allow a license due in part for the projected \$70,000 of local revenue the store could provide.⁵

These signs of growth and prosperity took a hit during the polio epidemic. The fate of the town's baseball team is a metaphor for what happened to a leisure oriented business enterprise during the polio epidemic. Many citizens recollect the Wytheville Statesmen and the impact their weekly absence left in the hearts of the community. Most do not mention the impact it had as a business. The stigma polio attached to America's favorite pastime in Wytheville was so great the team would not recover. Since the first case was the son of one of the baseball players, townspeople blamed the team for bringing polio to Wytheville. Both inside and outside Wytheville, the Statesmen faced opposition because of their association with this summer plague. The first signs of polio's impact came with team management resignations. On July 14, the Statesmen's Secretary/Treasurer, resigned followed by the General Manager on July 18. Attendance at games dropped from 1,000 to less than 100. Spectators who did attend refused to buy concessions for fear catching the disease. To get

1945 and 1954, Wytheville Community College, Dr. W.E. Chitwood Collection; National Register of Historic Places Registration Form, United States Department of the Interior, National Park Service, Kegley Special Collections, Wytheville Community College.

⁵ "ABC Profits for Town and County," *Southwest Virginia Enterprise*, September 9, 1949.

adults to the games, the club sponsored prizes for men to take home to their children— if both the husband *and* wife attended games the family received two gifts. In a time when women filled only ten percent of baseball parks, polio broke this barrier as the club tried to increase earnings by any means.⁶

Baseball directors from the other teams in the Blue Ridge League expressed their fans' "violent opposition" or "mass hysteria" to Wytheville's continued presence in the league. Surrounding clubs suspended field use to teams who invited the Statesmen to their towns. Due to such vehement opposition, Wytheville's Statesmen voluntarily suspended play for the season leaving the Blue Ridge League with only five teams.⁷ Ed Zuber was the Statesmen's pitcher until they disbanded. Until he found work with another team, Zuber worked as a handyman for his boarding house and mowed cemeteries to make ends meet.⁸

Stores in the heart of Wytheville saw little business from the local community as well. While many entertainment centers like the movie theatre, pool, and skating rink voluntarily closed their doors, economic necessity required other businesses to stay open despite the immediate threat polio posed. Those residents able to subsist on modest farm crops did so with little outside commodities. One resident remembered some townspeople with lemon trees made lemonade rather than buy tea and "bought coffee and sugar that summer and that's about all we bought. You didn't buy any clothing because you weren't sure."⁹

⁶ Rebecca Huddle, August 6, 2002, POHC; "Parents Attending Statesmen Game Will Be Given Free Jig Saw Puzzle, Other Gifts for the Children," *Southwest Virginia Enterprise*, July 18, 1950.

⁷ "Polio Forces Statesmen To Stop League Play," *Southwest Virginia Enterprise*, August 1, 1950.

⁸ Zuber, March 17, 2004, POHC.

⁹ Lester, September 17, 2004, POHC.

While public health concerns demanded the town businesses close, economics demanded they stay open. Businesses would not go out in a whimper. Charles McGovern and Lizabeth Cohen persuasively argue that spending and consumption were intimately linked with citizenship, patriotism, and national identity. Additionally, “in entertainment and public discourse Americans saw their common heritage defined as much by goods and leisure as by political abstractions or historical figures.”¹⁰ As a result, citizens looked for ways to sustain commerce while paying attention to disease. Scholar Andrew Hurley argues that leisure places like bowling alleys served as transitional locations where working class citizens rose to middle class society through consumption.¹¹ As these types of leisure places were closed at the start of the epidemic, they provided the most visible manifestations of the impact on the town’s economy. While leisure-oriented businesses shut down, other stores stayed open. Businesses were uncomfortable staying open to preserve their economic prosperity, as were the people who frequented them despite wanting to protect their families from polio.

In an effort to protect themselves and their customers, grocers adopted inventive ways to negotiate the need to preserve economic and personal wellbeing. Grocery stores across town like Kroger, Mick or Mack, and Piggly-Wiggly curtailed their hours to make up for the lack of revenue that summer. In adopting the measure together, no store gained an advantage over the other by staying open longer or during better hours. Concerning actually shopping, customers utilized unused milk bottles from local dairy farms. Children of a local doctor at the time remember grocery stores “would not let shoppers just come in and buy food; they had to

¹⁰ McGovern, *Sold American*; Cohen, *Consumer’s Republic*, 8.

¹¹ Andrew Hurley, *Diners, Bowling Alleys, and Trailer Parks: Chasing the American Dream in Postwar Consumer Culture*, (New York: Basic Books, 2002).

leave their grocery order in a milk bottle at the door and then the clerks would pick it up and fill that order.”¹²

Stores catering to the tourists and children fared the worst. The local five-and-dime stores like Kress and clothing store Leggett’s ran constant sales and advertisements to entice potential shoppers hiding behind closed doors.¹³ Greear Photo only accepted photos for development through the mail. Owners of small local enterprises, like Scotty’s Pastry Shop, sold out due to the lack of shoppers.¹⁴

The traveling salesman, an economic staple in the 1950s, disappeared with news of polio. Funeral home owner D.L. Barnett remembers not seeing any clothing or casket salesmen. The worsening epidemic forced Barnett to travel 34 miles to Bluefield Casket Company to buy all of the children and baby caskets they had in stock. Miraculously, with only 17 deaths, the majority of caskets were unused and given to local families when pets passed away.¹⁵

While some businesses adapted out of economic necessity, others arose out of the polio outbreak to take advantage of the situation. Numerous polio insurance advertisements popped up in the newspaper to entice poor and scared families— despite full expenses paid to all polio patients by the NFIP. Such insurance typically covered up to \$5,000 for each insured person

¹² “Early Sat. Night Closing at 4 Stores,” *Southwest Virginia Enterprise*, August 11, 1950; Drs. C.D. and Robert Moore, July 17, 2002, POHC.

¹³ While many can be found through scanning period circulars, Crest Stores Advertisements like the one found in the *Southwest Virginia Enterprise* on July 21, 1950, show direct advertisements to children that angered many readers.

¹⁴ “Scotty’s Pastry Shop Is Sold,” *Southwest Virginia Enterprise*, August 18, 1950; “Early Sat. Night Closing at 4 Stores,” *Southwest Virginia Enterprise*, August 11, 1950.

¹⁵ Barnett, August 6, 2002, POHC.

plus \$500 for accidental death, \$500 for loss of one hand or foot, and \$50 per month for 100 months for double limb loss.¹⁶

Public Health Department statements during the summer also point toward people peddling in commodities to stem the tide of polio. Preying off fear, these “Polio Quacks” sold items or drugs to parents wanting to preserve the health of their families. Traditional medical purveyors arose during this time of economic stagnation to profit from the epidemic. The following statement issued by Dr. V.E. Turner, health officer for the Southwest District of Virginia, explains the situation best:

The citizens of Wythe County are advised to beware and avoid purchasing any gadgets, or pills, etc., that are listed as a preventative to Polio, or as a general “cure all” of the disease. We know that there will be, and have already been those who will use the polio outbreak in this county to their personal advantage and as a medium of selling their products, and commercializing on the ill fortune of the people of this community.¹⁷

Though not a new occurrence, these “quacks” proliferated to as an environment for their products opened.

Many townspeople were comfortable with traditional medicine purveyors because of their rather long folk history. Townspeople were willing to purchase anything that might prevent the disease from spreading to themselves and their children. Much like the medical marketplace described by scholar Karen Flint in her discussion of the tensions between

¹⁶ “Protect Your Family Against Polio,” *Southwest Virginia Enterprise*, July 14, 1950.

¹⁷ “Health Officials Warn Citizens-Beware of ‘Polio Quacks,’” *Southwest Virginia Enterprise*, August 8, 1950.

professional biomedical practitioners and the traditional African inyangas (tribal healers) in South Africa, as more townspeople acquired these traditional remedies, public health officials saw these “polio quacks” as infringing on their authority.¹⁸

Government Inaction

Key to understanding the perception and subsequent reactions to polio is the negotiation of knowledge. People, especially in times of crisis, seek agency or autonomy and want to have some role in their own health. National and state public health authorities incompetently presented scientific knowledge. When understood, such “authoritative” knowledge conflicted with locally accepted and folk knowledge that residents trusted for so long. In his investigation of sheep farming after the nuclear incident at Chernobyl, Brian Wynne demonstrates the imperative nature of communicating practical scientific knowledge through his observations of the British government’s reaction to radioactive cesium fallout and the effect on sheep. By showing how the government first ignored and then provided useless solutions to the emergency, Wynne illustrates the need for better communication of scientific knowledge.¹⁹ The same conclusions can be reached for the reactions to Wytheville’s disastrous polio epidemic. Wynne’s observations help to explain the business community’s response to polio.

When polio first appeared in Wytheville, state health department officials adopted a “wait and see” approach. Townspeople were upset state public health authorities made no

¹⁸ Karen Flint, *Healing Traditions: African Medicine, Cultural Exchange, and Competition in South Africa, 1820-1948* (Athens: Ohio University Press, 2008), 129.

¹⁹ Brian Wynne, “Sheep Farming After Chernobyl: A Case Study In Communicating Scientific Information,” *Environment* 31, no. 2 (1989), 10-15.

strict recommendations to combat polio. In multiple letters and editorials, public health officers admonished readers that a state-mandated quarantine was uncalled for and would create an atmosphere of hysteria. Though townspeople urged the state health department to quarantine the town to stop the spread of polio, the state agency repeatedly denied the request and implemented an observational stance while sending in specialists to survey the course of the epidemic.²⁰

While state health officials decided on a cautionary and conservative approach toward the epidemic, some residents were skeptical of outsiders having ulterior motives. Seeming inaction by the state created a public relations nightmare. Some even openly questioned whether state-supplied specialists were prioritizing the study of the town's epidemic over the health of Wytheville's children, leaving one parent to decry, "They don't have our children at heart," and "we pay enough taxes to demand more interest from our leaders."²¹ Local leaders eventually enacted the spraying campaign discussed in Chapter 2 as a result of citizen complaints.

Some even suspected the local government of harboring a dismissive view of the epidemic, especially in its early days. As the immediate authority, local government officials absorbed the blame for state health department inadequacies. Carter Beamer, Town Manager that summer, issued a statement to townspeople informing them that rumors surrounding Town Council unwillingness to adopt a spraying program early in the epidemic were

²⁰ National, State and County Health Officials Meet Here Tues.; Several Polio Precautions Suggested," *Wythe County News*, July 27, 1950; "Gigantic Spraying Program Is Inaugurated-State Health Workers Hold Meet Here Today," *Southwest Virginia Enterprise*, July 25, 1950.

²¹ "An Anxious Mother" to William Arthur, July 23, 1950, R. William Arthur Papers, Kegley Special Collections of Wytheville Community College, Wytheville, Virginia.

unfounded.²² Dr. C.B. Hughes assured citizens in a personal letter printed in the *Southwest Virginia Enterprise* that the local government was cooperating with health officials and acting on their advice. He went on to acknowledge that quarantine, as many people wanted, must go through the state health department, who deemed this dramatic action unnecessary.²³

Though authorities adopted an observational approach to decrease hysteria, such a method had the opposite effect. Many parents reacted to the polio epidemic by quarantining themselves and especially their children. One writer urged the Mayor to make an official statement to counteract the many rumors surrounding the epidemic. “Why wait until all our children are in the hospital?”²⁴ Signed only “An Anxious Parent,” this writer expressed feelings many others felt. The Mayor and Town Manager wrote letters to the newspaper to counteract rumors and console worried constituents. Many of these grievances came from worried mothers, who informed the Mayor, “If there’s a shortage of men—appeal to the women—we’ll get out and take house to house and do our utmost to kill the germs.”²⁵

Action, Anger, and the Business Response

When the government did respond, their actions sent the economy into a tailspin. In addition to the DDT spraying campaign, the Town Council erected five large billboards at each entrance to the county which warned visitors of the town’s situation. The billboard read in stark black lettering over a blank white background: “Information for Tourists- POLIO

²² “Statement Issued by Town Manager Relative Rumors,” *Southwest Virginia Enterprise*, August 25, 1950.

²³ C.B. Hughes to “The People of Wytheville,” July 12, 1950, R. William Arthur Papers.

²⁴ “An Anxious Parent” to William Arthur, July 23, 1950, R. William Arthur Papers.

²⁵ “An Anxious Mother” to William Arthur, July 23, 1950, R. William Arthur Papers.

OUTBREAK- in Wytheville and Wythe County- If you do not stop with us this trip we invite you to visit us on your next vacation.”²⁶

While insurance and sale advertisements angered families, “quacks” annoyed health officials, and perceived local government inaction enraged families as well, with the local government finally doing something, the business community was infuriated. Businessmen were angry with what they perceived as local government meddling in their affairs. Carter Beamer, Town Manager at the time, recalled that erecting warning signs at the town limits, “though well-intended, wasn’t accepted real good with the business community because they felt that we should let people stop if they wanted to.”²⁷ Meanwhile, the Kiwanis Club of Wythe County “unanimously” and “vigorously opposed” the action and petitioned Mayor Arthur for their removal. Despite condemnation from these and other business groups, the Town Council left the signs after the State Health Department (in an effort to improve souring public relations) reversed its previous decision and endorsed the idea.²⁸

By creating the warning billboards, town administrators hoped to two problem simultaneously caused by the outbreak. While saving tourists from potential infection, it also created the favorable image of an unselfish town to combat the dreary picture of Wytheville in newspapers across the country. The Council won an initial victory with the erection of the warning signs along the five national highways that intersect the town. By August 1, however, unknown assailants had torn or mutilated all five signs, not once, but twice. Though the Town

²⁶ A reconstructed sign can be found at the Thomas J. Boyd Museum’s Polio Exhibit in Wytheville, Virginia.

²⁷ Beamer, August 8, 2002, POHC.

²⁸ Lewis Jones to William Arthur, July 29, 1950, R. William Arthur Papers; William Arthur to Lewis Jones, July 29, 1950, R. William Arthur Papers.

Council offered a \$100 reward for information leading to an arrest, no one was prosecuted. Ironically, after the epidemic the Chamber of Commerce reconstructed and remade the old billboards into signs welcoming tourists to Wytheville.²⁹

Even greater than the destruction of the warning signs in contributing to the anger of health conscious Wythevillians, however, were the perceived actions by business conscious Wythevillians in attempting to promote commerce during the epidemic. Advertisements and sales targeted at families and children repeatedly appeared in the town's newspaper and on the radio. Townspeople wrote editorials or letters to the editor condemning such actions as inappropriate, selfish, and inherently evil.³⁰

Community businessmen and organizations responded to local government actions and public ire in a variety of ways. After several scathing attacks by townspeople on these perceived unethical business tactics, the Citizens Committee and Retail Merchants Association published a series of letters and roundtable discussions on the radio to the people of Wytheville that tried to appease readers and justify merchant actions. Though the radio program has not survived, the general tone of the message can be interpreted through an analysis of people's reactions to the program. Printed in the *Enterprise* as an "explanation and to assure all citizens that the business men are very anxious to aid all Wythe County" the Citizens Committee attempted to justify remarks made by some of their representatives on a radio program during a previous evening. In the letter, they sought to rectify statements many interpreted as callous or even malicious. "Any statement or statements that were construed by anyone to mean

²⁹ "\$100 Reward Says Council, Conviction of Person, Persons Tearing Down Signs," *Southwest Virginia Enterprise*, August 1, 1950; "C. of C. Has Plans for Use of Signs," *Southwest Virginia Enterprise*, August 18, 1950.

³⁰ "Voice of the People," *Southwest Virginia Enterprise*, August 4, 1950.

participants [in the radio broadcast] were intent on urging people to come back and trade, or, that children were asked to leave their homes, or, that any precautionary measures should be dropped is an absolute misinterpretation of that statements made.” The letter went on, however, to provide a veiled ultimatum stating, “Unless the adverse publicity is stopped it stands to reason that the business firms cannot continue to employ six hundred people, who in many instances are heads of families.”³¹

Business owners blamed substantial loss of revenue, in part, on bad publicity. Much like scholar Eric Jarvis’ account of the 1962 encephalitis epidemic in St. Petersburg, Florida, many in Wytheville felt action needed to be taken on two fronts: public health and public relations.³² Both towns depended on a tourism based economy. Wytheville already enacted a spraying campaign on the public health front, however, the business community felt the town did nothing to prevent bad publicity. On August 4th, Jim Williams, editor of the *Enterprise* and acting President of Wytheville’s Chamber of Commerce, sent a scathing letter to Stanley Whitaker, Southern Division Manager of United Press, regarding a particularly unfavorable description of Wytheville. The article had referred to Wytheville as a “ghost town.” While not particularly damning in hindsight, remarks such as this one were widespread and had the potential to severely damage the town’s tourism industry. Former tourists already avoided the town during the summer. Townspeople remember those few passersby forced to intersect Wytheville did so begrudgingly— with mouths covered and windows up. Whitaker assured Williams the town held their sympathies; however, the division manager replied, “we want fair

³¹ “An Open Letter to Wythe Countians,” *Southwest Virginia Enterprise*, August 4, 1950; “A Friendly Factual Message to the Citizens of Wythe and Adjoining Counties,” *Southwest Virginia Enterprise*, August 25, 1950.

³² Eric Jarvis, “A Plague in Paradise: Public Health and Public Relations During the 1962 Encephalitis Epidemic in St. Petersburg, Florida,” *Florida Historical Quarterly* 85 (Spring 2007), 371-97.

treatment too. It is damaging to us to be accused of inaccuracies. Everything we said in our stories came from responsible people in Wytheville.” The reporter in question assured Williams he received the dismal description from Drs. Brock Hughes and C.F. Pope, as well as Douglas Smith of Wytheville’s radio station WYVE.³³

The business community responded to the epidemic by adapting to survive. If being a part of community during an epidemic meant protecting the public health, it also meant protecting economic health as a backbone and lifeline of the family. Economic health in the 1950s was identified as an extension of public health. While most leisure oriented businesses folded early, others altered their practices to survive the summer.

While the immediate and temporary economic effects of the outbreak are evident, polio had additional long-term consequences. Though commerce returned, tourist levels did not return to pre-polio highs. Emblematic of this trend, we turn once again to the Wytheville Statesmen. Though optimistic about their chances in future seasons, the team never recovered. League President John Spiers brought a team from Bassett, Virginia to take Wytheville’s place in the league, and the remaining teams were forbidden by the league to sign on members from Wytheville fearing polio would enter their towns.³⁴ Wytheville management converted Wither’s Field to the local high school’s football field, but even then only a few teams would play against them. Ed Zuber, the left-handed pitcher for the Statesmen, was eventually

³³ James Williams was President of the Chamber of Commerce *and* Editor of the local newspaper. Taking into account this association, the plethora of accounts in the local newspaper on Wytheville’s status as a hub of commercial activity during the epidemic were reviewed and cross-referenced with other accounts. All indications point toward little economic activity and the many positive economic accounts in Williams’ newspaper indicate something is, indeed, amiss. Stanley Whitaker to James A. Williams, August 7, 1950, R. William Arthur Papers.

³⁴ “Statesmen Players Placed With Clubs Throughout the Area,” *Southwest Virginia Enterprise*, August 4, 1950.

transferred to a team in Kingsport, Tennessee, where he met and married a woman visiting relatives— ironically from Wytheville.³⁵ Today, a pentagonal home plate plaque stands in the park where Withers Field once was to commemorate this very important business and standard-bearer of community in Wytheville. This is one of only a few physical reminders of such an important event in local history, and is representative of the Wytheville epidemic's equally neglected place in the historical literature of polio. There is also a stained glass window dedicated to one of the fallen children in Holy Trinity Lutheran Church.

Perhaps the most lasting reminder of the town's struggle in 1950 is an exhibit on the polio epidemic in the Thomas J. Boyd Museum. Finished in 2007, this professionally designed exhibit features audio recordings from survivors, vivid full sized pictures, a child's iron lung, and an adult iron lung which belonged to Lee Hale (the record-holding iron lung survivor). This museum holds a unique position as both a testament to the history of this epidemic and a current component of the local economy as a tourist attraction. Ironic that the townspeople of Wytheville turn a small profit from this tourist attraction based on an event which kept tourists far away during this pivotal time in Wytheville's history.

³⁵ Zuber, March 17, 2003, POHC.

Conclusion

Though the last case of polio in the United States occurred in 1979, polio remains a threat in Nigeria, Afghanistan, Pakistan, and India. With support from the World Health Organization and the Bill and Melinda Gates Foundation, Rotary International announced a “window of opportunity of historic proportions.” After years of advocacy and fundraising over \$1.2 billion, scientists and medical professionals believe polio is “on the brink of eradication.”¹ With many anticipating the disease to enter the miniscule list of extinct diseases with smallpox, polio is increasingly becoming an object of bygone curiosity rather than a real and important episode in American history. Studying the impact of polio on the community of Wytheville might help public health officials as they confront contagious diseases in other times and places. While situations manifest differently, the interplay of cultural values and disease dictates public response to prevention and cure.

Polio outbreaks occurred throughout the United States during the first half of the twentieth century. The story of polio in Wytheville illustrates how a town responded to the epidemic at a time before the vaccine but when contagion was well understood among the scientific establishment and during the consumer driven and family centered early 1950s.

Wytheville was characteristic of many towns, small and large, hit by polio outbreaks during the first half of the twentieth century. The terror, ideological conflicts, and reactions to polio accompanied mass epidemics from metropolitan New York to smaller cluster towns in Texas. Due to the distinctive character of this particular town’s outbreak, Wytheville proved a

¹ Rotary International, “Polio,” Service and Fellowship, www.rotary.org/en/ServiceAndFellowship/Polio [accessed April 5, 2012].

unique case study into examining relationships during and toward community among family, public health, and business responses to the epidemic.

Chapter One illustrated the individual responses among families during Wytheville's polio epidemic. In 1949, few worried about an epidemic of the magnitude as many subsequently witnessed during the "summer without children." In the child-centered atmosphere of the post-World War II American family, parents responded in different ways to an acute and terrifying medical threat. For both adults and children, the culture of small town community was necessarily, if only temporarily altered, to preserve the sanctity of childhood and leisure. In 1951, though many aspects of life and leisure returned to their pre-epidemic status, there were many reminders of that ill-fated summer.

Chapter Two examined the public health response to polio and its effect of community. Newspaper articles, editorials, and a plethora of personal letters consistently illustrated a town plagued by the ever-present peril of polio. Due to unreconciled notions of the disease and miscommunication between medical authorities at the national and state level to the local population the community responded to the invisible menace in a variety of ways— some more effective than others. The ineffective communication of scientific and medical knowledge sparked distrust and catalyzed the internal war waged in the minds of Wythevillians on how best to protect both their wealth and health.

Chapter Three argued for a complex relationship between the societal pressures discussed in the previous two chapters and the economic ethos of the post-war era which bubbled to the surface during Wytheville's epidemic. The tensions between physical and economic wellbeing in this 1950s agricultural, commercial, and tourist town manifested

dramatically for a community of its size. Arguments between business proprietors and parents of young children illustrate the worry about how best to juggle these competing ideals. The seemingly unsympathetic actions taken by merchants in Wytheville sparked protest in editorials of the local newspapers by families who felt businessmen did not care for the safety of their children or the health of the community. While not necessarily mutually exclusive in normal circumstances, the atmosphere created by polio dictated townspeople chose one over the other.

This thesis suggests avenues of investigation. Such lines might include comparison studies with contemporary medical threats such as HIV, SARS, or H1N1. Another route of analysis could compare the American epidemic and vaccination experience with other locations still going through the eradication process like Nigeria or Pakistan.

The circumstances surrounding Wytheville are suggestive of more than what happened in this one small town. This research is also about the nature/meaning of community in post-World War II small town America. The connections with the larger world and the ties that bound members to each other are suggestive of this larger point. With community serving as nexus for the tensions inherent in negotiating economics and health, being a part of a small town community during the 1950s during an acute medical crisis meant being sensitive to the public health while simultaneously recognizing the realistic demands of post-war consumerism and its emphasis on the individual capitalist protestant ethic.

Prior to the epidemic, community in Wytheville was a social network characterized by rural communal activities like baseball, church, and other large gatherings. With polio hindering such a manifestation of community, traditional forms of community ties broke down.

They returned in 1951, but not without memories of the 1950 epidemic lurking in amongst the crowds of people on Main Street or the sounds of passing sirens, and not also without important lessons learned regarding the nature of community, knowledge, and disaster relief that may resonate and inform contemporary society.

In sum, the history of Wytheville's polio epidemic in the summer of 1950 shows how polio, the focus on children, and desire to protect the young in this situation framed a context in which underlying tensions of post-war America bubbled to the surface. Within this context, the polio narrative in Wytheville illustrates why studying this local situation is valuable for our understanding of the relationship between medical expertise and local or folk approaches to prevention and treatment of disease. Most importantly, this town's polio narrative demonstrates how community and individual self-interest came into conflict during an acute polio epidemic in the 1950s.

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